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(54) Title: TREATMENT AND DIAGNOSIS OF CANCER

(57) Abstract

The present invention is directed to the use of antibodies or binding portions thereof, probes, ligands, or other biological agents which either recognize an extracellular domain of prostate specific membrane antigen or bind to and are internalized with prostate specific membrane antigen. These biological agents can be labeled and used for detection of cancerous tissues, particularly cancerous tissues proximate to or containing vascular endothelial cells, which express an extracellular domain of prostate specific membrane antigen. The labeled biological agents can also be used to detect normal, benign hyperplastic, and cancerous prostate epithelial cells or portions thereof. They also can be used alone or bound to a substance effective to ablate or kill such cells as a therapy for prostate or other cancers. Also disclosed are four hybridoma cell lines, each of which produces a monoclonal antibody recognizing extracellular domains of prostate specific membrane antigens of normal, benign hyperplastic, and cancerous prostate epithelial cells or portions thereof.

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TREATMENT AND DIAGNOSIS OF CANCER

The present application claims the benefit of U.S. Provisional Patent Application 60/022,125, filed July 18, 1996, and is a continuation-in-part of U.S. Patent Application Serial No. 08/838,682, filed April 9, 1997, which claims the benefit of U.S. Provisional Patent Application Serial No. 60/016,976, filed May 6, 1996.

10 FIELD OF THE INVENTION

The present invention relates to the treatment and diagnosis of cancer with biological agents.

15 BACKGROUND OF THE INVENTION

In spite of improved treatments for certain forms of cancer, it is still a leading cause of death in the United States. Since the chance for complete remission of cancer is, in most cases, greatly enhanced by early diagnosis, it is very desirable that physicians be able to detect cancers before a substantial tumor develops. However, the development of methods that permit rapid and accurate detection of many forms of cancers continues to challenge the medial community. One such illustrative form of cancer is prostate cancer.

Prostate cancer is the most common cancer in men with an estimated 317,000 cases in 1996 in the United States. It is the second leading cause of death among men who die from neoplasia with an estimated 40,000 deaths per year. Prompt detection and treatment is needed to limit mortality caused by prostate cancer.

Detection of Prostate Cancer

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When it metastasizes, prostatic cancer has a distinct predilection for bone and lymph nodes. Saitoh et al., "Metastatic Patterns of Prostatic Cancer. Correlation Between Sites And Number Of Organs Involved," Cancer, 54:3078-3084 (1984). At the time of clinical

diagnosis, as many as 25% of patients have bone metastasis demonstrable by radionuclide scans. Murphy. G.P., et al., "The National Survey Of Prostate Cancer In The United States By The American College Of Surgeons," 5 J. Urol., 127:928-939 (1982). Accurate clinical evaluation of nodal involvement has proven to be difficult. Imaging techniques such as computed tomography ("CT") or magnetic resonance ("MR") imaging are unable to distinguish metastatic prostate cancer 10 involvement of lymph nodes by criterion other than size (i.e., > 1 cm). Therefore, by definition, these imaging modalities are inherently insensitive in the detection of small volume (< 1 cm) disease as well as non-specific in the detection of larger volume adenopathy. A recent study assessed the accuracy of MR in patients with 15 clinically localized prostate cancer. Rifkin et al., "Comparison Of Magnetic Resonance Imaging And Ultrasonography In Staging Early Prostate Cancer, " N. Engel. J. Med., 323:621-626 (1990). In this study, 194 patients underwent an MR and 185 of these patients had a 20 lymph node dissection. 23 (13%) patients had pathologically involved lymph nodes. MR was suspicious in only 1 of these 23 cases resulting in a sensitivity of 4%. Similar results have also been noted with CT scans. Gasser et al., "MRI And Ultrasonography In Staging 25 Prostate Cancer, " N. Engl. J. Med. (Correspondence), 324(7):49-495 (1991).

The elevation of serum acid phosphatase activity in patients having metastasized prostate

30 carcinoma was first reported by Gutman et al., J. Clin.

Invest 17:473 (1938). In cancer of the prostate, prostatic acid phosphatase is released from the cancer tissue into the blood stream with the result that the total serum acid phosphatase level can be greatly

35 increased above normal values. Numerous studies of this enzyme and its relation to prostatic cancer have been made since that time, e.g. Yam __mer. J. Med. 56:604

(1974). However, the measurement of serum acid phosphatase is elevated in about 65-90 percent of patients having carcinoma of the prostate with bone metastasis; in about 30 percent of patients without roentgenological evidence of bone metastasis; and in about only 5-10 percent of patients lacking clinically demonstrable metastasis.

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Prior art attempts to develop a specific test for prostatic acid phosphatase have met with only limited success, because techniques which rely on enzyme activity on a so-called "specific" substrate cannot take into account other biochemical and immunochemical differences among the many acid phosphatases which are unrelated to enzyme activity of prostate origin. In the case of isoenzymes, i.e. genetically defined enzymes having the same characteristic enzyme activity and a similar molecular structure but differing in amino acid sequences and/or content and, therefore, immunochemically distinguishable, it would appear inherently impossible to distinguish different isoenzyme forms merely by the choice of a particular substrate. It is, therefore, not surprising that none of these prior art methods is highly specific for the direct determination of prostatic acid phosphatase activity; e.g. see Cancer 5:236 (1952); J. Lab. Clin. Med. 82:486 (1973); Clin. Chem. Acta. 44:21 (1973); and <u>J. Physiol. Chem.</u> 356:1775 (1975).

In addition to the aforementioned problems of non-specificity which appear to be inherent in many of the prior art reagents employed for the detection of prostate acid phosphatase, there have been reports of elevated serum acid phosphatase associated with other diseases, which further complicates the problem of obtaining an accurate clinical diagnosis of prostatic cancer. For example, Tuchman et al., Am. J. Med. 27:959 (1959) noted that serum acid phosphatase levels appear to be elevated in patients with Gaucher's disease.

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Due to the inherent difficulties in developing a "specific" substrate for prostate acid phosphatase, several researchers have developed immunochemical methods for the detection of prostate acid phosphatase. However, the previously reported immunochemical methods have 5 drawbacks of their own which have precluded their widespread acceptance. For example, Shulman et al., Immunology 93:474 (1964) described an immuno-diffusion test for the detection of human prostate acid phosphatase. Using antisera prepared from a prostatic 10 fluid antigen obtained by rectal massage from patients with prostatic disease, no cross-reactivity precipitin line was observed in the double diffusion technique against extracts of normal kidney, testicle, liver, and lung. However, this method has the disadvantages of 15 limited sensitivity, even with the large amounts of antigen employed, and of employing antisera which may cross-react with other, antigenically unrelated serum protein components present in prostatic fluid.

WO 79/00475 to Chu et. al. describes a method for the detection of prostatic acid phosphatase isoenzyme patterns associated with prostatic cancer which obviates many of the above drawbacks. However, practical problems are posed by the need for a source of cancerous prostate tissue from which the diagnostically relevant prostatic acid phosphatase isoenzyme patterns associated with prostatic cancer are extracted for the preparation of antibodies thereto.

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In recent years, considerable effort has been spent to identify enzyme or antigen markers for various types of malignancies with the view towards developing specific diagnostic reagents. The ideal tumor marker would exhibit, among other characteristics, tissue or cell-type specificity. Previous investigators have demonstrated the occurrence of human prostate tissue-specific antigens.

Treatment of Prostate Cancer

As described in W.J. Catalona, "Management of Cancer of the Prostate," <u>New Engl. J. Med.</u>,

331(15):996-1004 (1994), the management of prostate cancer can be achieved by watchful waiting, curative treatment, and palliation.

For men with a life expectancy of less than 10 years, watchful waiting is appropriate where low-grade,
10 low-stage prostate cancer is discovered at the time of a partial prostatectomy for benign hyperplasia. Such cancers rarely progress during the first five years after detection. On the other hand, for younger men, curative treatment is often more appropriate.

Where prostate cancer is localized and the patient's life expectancy is 10 years or more, radical prostatectomy offers the best chance for eradication of the disease. Historically, the drawback of this procedure is that most cancers had spread beyond the bounds of the operation by the time they were detected. However, the use of prostate-specific antigen testing has permitted early detection of prostate cancer. As a result, surgery is less extensive with fewer complications. Patients with bulky, high-grade tumors are less likely to be successfully treated by radical prostatectomy.

After surgery, if there are detectable serum prostate-specific antigen concentrations, persistent cancer is indicated. In many cases, prostate-specific antigen concentrations can be reduced by radiation treatment. However, this concentration often increases again within two years.

Radiation therapy has also been widely used as an alternative to radical prostatectomy. Patients

generally treated by radiation therapy are those who are older and less healthy and those with higher-grade, more clinically advanced tumors. Particularly preferred procedures are external-beam therapy which involves three

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dimensional, conformal radiation therapy where the field of radiation is designed to conform to the volume of tissue treated; interstitial-radiation therapy where seeds of radioactive compounds are implanted using ultrasound guidance; and a combination of external-beam therapy and interstitial-radiation therapy.

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For treatment of patients with locally advanced disease, hormonal therapy before or following radical prostatectomy or radiation therapy has been utilized. Hormonal therapy is the main form of treating men with 10 disseminated prostate cancer. Orchiectomy reduces serum testosterone concentrations, while estrogen treatment is similarly beneficial. Diethylstilbestrol from estrogen is another useful hormonal therapy which has a disadvantage of causing cardiovascular toxicity. 15 gonadotropin-releasing hormone agonists are administered testosterone concentrations are ultimately reduced. Flutamide and other nonsteroidal, anti-androgen agents block binding of testosterone to its intracellular receptors. As a result, it blocks the effect of 20 testosterone, increasing serum testosterone concentrations and allows patients to remain potent -- a significant problem after radical prostatectomy and radiation treatments.

Cytotoxic chemotherapy is largely ineffective in treating prostate cancer. Its toxicity makes such therapy unsuitable for elderly patients. In addition, prostate cancer is relatively resistant to cytotoxic agents.

Use of Monoclonal Antibodies in Prostate Cancer Detection and Treatment

Theoretically, radiolabeled monoclonal antibodies ("mAbs") offer the potential to enhance both 35 the sensitivity and specificity of detecting prostatic cancer within lymph nodes and elsewhere. While many mAbs have previously been prepared against prostate related

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antigens, none of these mAbs were specifically generated with an imaging objective in mind. Nevertheless, the clinical need has led to evaluation of some of these mAbs as possible imaging agents. Vihko et al., "Radioimaging of Prostatic Carcinoma With Prostatic Acid Phosphatase - Specific Antibodies," <u>Biotechnology in Diagnostics</u>, 131-134 (1985); Babaian et al., "Radioimmunological Imaging of Metastatic Prostatic Cancer With 111-Indium-Labeled Monoclonal Antibody PAY 276,"

- J. Urol., 137:439-443 (1987); Leroy et al.,

 "Radioimmunodetection Of Lymph Node Invasion In Prostatic
 Cancer. The Use Of Iodine 123 (123-I)-Labeled Monoclonal
 Anti-Prostatic Acid Phosphatase (PAP) 227 A F (ab') 2
 Antibody Fragments In Vivo, "Cancer, 64:1-5 (1989);
- Meyers et al., "Development Of Monoclonal Antibody
 Imaging Of Metastatic Prostatic Carcinoma," <u>The Prostate</u>,
 14:209-220 (1989).

In some cases, the monoclonal antibodies developed for detection and/or treatment of prostate cancer recognize antigens specific to malignant prostatic tissues. Such antibodies are thus used to distinguish malignant prostatic tissue (for treatment or detection) from benign prostatic tissue. See U.S. Patent No. 4,970,299 to Bazinet et al. and U.S. Patent No. 4,902,615 to Freeman et al.

Other monoclonal antibodies react with surface antigens on all prostate epithelial cells whether cancerous or benign. See U.S. Patent Nos. 4,446,122 and Re 33,405 to Chu et al., U.S. Patent No. 4,863,851 to McEwan et al., and U.S. Patent No. 5,055,404 to Ueda et al. However, the antigens detected by these monoclonal antibodies are present in the blood and, therefore, compete with antigens at tumor sites for the monoclonal antibodies. This causes background noise which makes the use of such antibodies inadequate for in vivo imaging. In therapy, such antibodies, if bound to a cytotoxic agent, could be harmful to other organs.

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Horoszewicz et al., "Monoclonal Antibodies to a New Antigenic Marker in Epithelial Prostatic Cells and Serum of Prostatic Cancer Patients, " Anticancer Research, 7:927-936 (1987) ("Horoszewicz") and U.S. Patent No. 5,162,504 to Horoszewicz describe an antibody, designated 7E11, which recognizes prostate specific membrane antigen Israeli et al., "Molecular Cloning of a ("PSMA"). Complementary DNA Encoding a Prostate-specific Membrane Antigen, " Cancer Research, 53:227-230 (1993) ("Israeli") describes the cloning and sequencing of PSMA and reports 10 that PSMA is prostate-specific and shows increased expression levels in metastatic sites and in hormonerefractory states. Other studies have indicated that PSMA is more strongly expressed in prostate cancer cells relative to cells from the normal prostate or from a 15 prostate with benign hyperplasia. Furthermore, PSMA is not found in serum (Troyer et al., "Detection and Characterization of the Prostate-Specific Membrane Antigen (PSMA) in Tissue Extracts and Body Fluids, " Int. J. Cancer, 62:552-558 (1995)). 20

These characteristics make PSMA an attractive target for antibody mediated targeting for imaging and therapy of prostate cancer. Imaging studies using indium-labeled 7E11 have indicated that the antibody localizes quite well to both the prostate and to sites of metastasis. In addition, 7E11 appears to have clearly improved sensitivity for detecting lesions compared to other currently available imaging techniques, such as CT and MR imaging or bone scan. Bander, "Current Status of Monoclonal Antibodies for Imaging and Therapy of Prostate Cancer," Sem. In Oncology, 21:607-612 (1994).

However, the use of 7E11 and other known antibodies to PSMA to mediate imaging and therapy has several disadvantages. First, PSMA is an integral membrane protein known to have a short intracellular tail and a long extracellular domain. Biochemical characterization and mapping (Troyer et al., "Biochemical

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Characterization and Mapping of the 7E11-C5.3 Epitope of the Prostate-specific Membrane Antigen, "Urol. Oncol., 1:29-37 (1995)) have shown that the epitope or antigenic site to which the 7E11 antibody binds is present on the intracellular portion of the molecule. Because antibody molecules do not, under normal circumstances, cross the cell membrane unless they bind to the extracellular portion of a molecule and become translocated intracellularly, the 7E11 antibody does not have access to its antigenic target site in an otherwise healthy, viable cell.

Consequently, imaging using 7E11 is limited to the detection of dead cells within tumor deposits. Additionally, the therapeutic use of the 7E11 antibody is limited, because only cells that are already dead or tissue containing a large proportion of dead cells can be effectively targeted.

Although the inadequacies and problems in the diagnosis and treatment of one particular type of cancer are the focus of the preceding discussion, prostate cancer is merely a representative model. The diagnosis and treatment of numerous other cancers have similar problems.

The present invention is directed to overcoming
the deficiencies of prior art antibodies in diagnosing
and treating prostate and other types of cancer.

SUMMARY OF THE INVENTION

One aspect of the present invention relates to a method of ablating or killing cancerous cells. The process involves providing a biological agent which, when contacted with an extracellular domain of prostate specific membrane antigen, recognizes the extracellular domain of prostate specific membrane antigen. These biological agents are contacted with vascular endothelial cells proximate to the cancerous cells under conditions

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effective to permit both binding of the biological agent to the vascular endothelial cells proximate to the cancerous cells and killing or ablating of the cancerous The biological agent can be used alone or can be bound to a substance effective to kill or ablate the cancerous cells upon binding of the biological agent to vascular endothelial cells that are proximate to the cancerous cells.

In a particularly preferred embodiment of the method of ablating or killing cancerous cells in 10 accordance with the present invention, the biological agent, when contacted with an extracellular domain of prostate specific membrane antigen, binds to and is internalized with the prostate specific membrane antigen of such cells. Preferred biological agents for use in 15 the method of ablating or killing cancerous cells in accordance with the present invention are antibodies or binding portions thereof, probes, or ligands. methods of the present invention are particularly useful in killing or ablating renal, urothelial, colon, rectal, 20 lung, and breast cancerous cells and cancerous cells of metastatic adenocarcinoma to the liver. Another aspect of the present invention relates to a method of detecting cancerous tissue in a biological This method involves providing a biological 25 sample. agent which, when contacted with an extracellular domain of prostate specific membrane antigen, binds to the extracellular domain of prostate specific membrane The biological agent is bound to a label effective to permit detection of vascular endothelial 30 cells proximate to or within the cancerous tissue upon binding of the biological agent to the vascular endothelial cells proximate to or within the cancerous tissue. The biological sample is contacted with the biological agent having a label under conditions 35 effective to permit binding of the biological agent to the vascular endothelial cells proximate to or within the

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cancerous tissue in the biological sample. The presence of cancerous tissue in the biological sample is detected by detection of the label.

In a particularly preferred embodiment of the method of detecting cancerous tissue in accordance with the present invention, the biological agent is one that, when contacted with an extracellular domain of prostate specific membrane antigen, binds to and is internalized with the prostate specific membrane antigen. Preferred biological agents for use in the method of detecting cancerous tissue in accordance with the present invention are antibodies or binding portions thereof, probes, or ligands. The method is especially useful in detecting renal, urothelial, colon, rectal, lung, and breast cancerous tissue and cancerous tissue of metastatic adenocarcinoma to the liver.

Still another aspect of the present invention relates to a method of ablating or killing normal, benign hyperplastic, and cancerous prostate epithelial cells.

The process involves providing a biological agent which recognizes an extracellular domain of prostate specific membrane antigen. The biological agent can be used alone or can be bound to a substance effective to kill the cells upon binding of the biological agent to the cells.

These biological agents are then contacted with the cells under conditions effective to permit both binding of the biological agent to the extracellular domain of the prostate specific membrane antigen and killing or ablating of the cells.

In a particularly preferred embodiment of the method of ablating or killing normal, benign hyperplastic, and cancerous prostate epithelial cells in accordance with the present invention, the biological agent binds to and is internalized with the prostate specific membrane antigen of such cells. Preferred biological agents for use in the method of ablating or killing normal, benign hyperplastic, and cancerous

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prostate epithelial cells in accordance with the present invention are antibodies or binding portions thereof, probes, or ligands.

Another aspect of the present invention relates to a method of detecting normal, benign hyperplastic, and 5 cancerous prostate epithelial cells or portions thereof in a biological sample. This method involves providing a biological agent which binds to an extracellular domain of prostate specific membrane antigen. The biological agent is bound to a label effective to permit detection 10 of the cells or portions thereof upon binding of the biological agent to the cells or portions thereof. The biological sample is contacted with the biological agent having a label under conditions effective to permit binding of the biological agent to the extracellular 15 domain of the prostate specific membrane antigen of any of the cells or portions thereof in the biological sample. The presence of any cells or portions thereof in the biological sample is detected by detection of the 20 label.

In a particularly preferred embodiment of the method of detecting normal, benign hyperplastic, and cancerous prostate epithelial cells in accordance with the present invention, the biological agent binds to and is internalized with the prostate specific membrane antigen of such cells. Preferred biological agents for use in the method of detecting normal, benign hyperplastic, and cancerous prostate epithelial cells in accordance with the present invention are antibodies or binding portions thereof, probes, or ligands.

Another aspect of the present invention pertains to a biological agent that recognizes an extracellular domain of prostate specific membrane antigen. In a preferred embodiment, the isolated biological agent binds to and is internalized with the prostate specific membrane antigen. Preferred isolated biological agents which recognize an extracellular domain

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of prostate specific membrane antigen in accordance with the present invention are isolated antibodies or binding portions thereof, probes, or ligands. Hybridoma cell lines that produce monoclonal antibodies of these types are also disclosed.

The biological agents of the present invention recognize the extracellular domain of antigens of normal, benign hyperplastic, and cancerous prostate epithelial cells. Unlike the 7E11 antibody, which recognizes an epitope of prostate-associated antigens which are exposed 10 extracellularly only after cell lysis, the biological agents of the present invention bind to antigenic epitopes which are extracellularly exposed in living prostate cells. Using the biological agents of the present invention, living, unfixed normal, benign 15 hyperplastic, and cancerous prostate epithelial cells can be targeted, which makes treatment and diagnosis more effective. In a preferred embodiment for treating prostate cancer, the biological agents of the present invention also bind to and are internalized with the 20 prostate specific membrane antigen, which permits the therapeutic use of intracellularly acting cytotoxic agents.

BRIEF DESCRIPTION OF THE DRAWINGS

Figure 1 is an immuno-electron micrograph of gold-labeled monoclonal antibody J591 on the surface of LNCaP cells after incubation at 4°C.

Figure 2 is an immuno-electron micrograph of LNCaP cells treated with gold-labeled monoclonal antibody J591 after 5 minutes incubation at 37°C.

Figure 3 is an immuno-electron micrograph of LNCaP cells treated with gold-labeled monoclonal antibody J591 after 10 minutes incubation at 37°C.

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Figure 4 is an immuno-electron micrograph of LNCaP cells treated with gold-labeled monoclonal antibody J591 after 15 minutes incubation at 37°C.

Figure 5 is an immuno-electron micrograph of LNCaP cells treated with gold-labeled monoclonal antibody J591 after 15 minutes at 37°C showing J591 within endosomes.

Figure 6 summarizes the sequencing strategy of the heavy chain of monoclonal antibody J591.

Figure 7 shows the nucleotide sequence of the heavy chain of monoclonal antibody J591 (designated SEQ.ID. No. 1), the nucleotide sequence of the corresponding reverse, non-coding strand (designated SEQ. ID. No. 2), and the corresponding deduced amino acid sequences (designated SEQ. ID. Nos. 3, 4, and 5).

Figure 8 is a comparison of the heavy chain of monoclonal antibody J591 with the consensus sequence for Mouse Heavy Chains Subgroup IIA.

Figure 9 summarizes the sequencing strategy of the kappa light chain of monoclonal antibody J591.

Figure 10 shows the nucleotide sequences of the kappa light chain of monoclonal antibody J591 (designated SEQ.ID. No. 9), the nucleotide sequence of the corresponding reverse, non-coding strand (designated SEQ.

25 ID. No. 10), and the corresponding deduced amino acid sequence (designated SEQ. ID. Nos. 11, 12, and 13).

Figure 11 is a comparison of the kappa light chain of monoclonal antibody J591 with the consensus sequence for Mouse Kappa Chains Subgroup V.

Figures 12A-12F are micrographs (250 \times magnification) showing the immunohistochemical reactivity of mAb J591 to neovasculature of various carcinomas.

DETAILED DESCRIPTION OF THE INVENTION

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One aspect of the present invention relates to a method of ablating or killing normal, benign

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hyperplastic, and cancerous prostate epithelial cells. The process involves providing a biological agent, such as an antibody or binding portion thereof, probe, or ligand, which binds to an extracellular domain of prostate specific membrane antigen of (i.e., a portion of prostate specific membrane antigen which is external to) such cells. The biological agent can be used alone or can be bound to a substance effective to kill the cells upon binding of the biological agent to the cells. biological agents are then contacted with the cells under 10 conditions effective to permit both binding of the biological agent to the extracellular domain of the prostate specific membrane antigen and killing or ablating of the cells. In its preferred form, such contacting is carried out in a living mammal by 15 administering the biological agent to the mammal under conditions effective to permit both binding of the biological agent to the extracellular domain of the prostate specific membrane antigen and killing or 20 ablating of the cells. Such administration can be carried out orally or parenterally.

In a particularly preferred embodiment of the method of ablating or killing normal, benign hyperplastic, and cancerous prostate epithelial cells in accordance with the present invention, the biological agent binds to and is internalized with the prostate specific membrane antigen of such cells. Again, the biological agent can be used alone. Alternatively, the biological agent can be bound to a substance effective to kill the cells upon binding of the biological agent to prostate specific membrane antigen and upon internalization of the biological agent with the prostate specific membrane antigen.

The mechanism by which the biological agent is internalized with the prostate specific membrane antigen is not critical to the practice of the present invention. For example, the biological agent can induce

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internalization of the prostate specific membrane antigen. Alternatively, internalization of the biological agent can be the result of routine internalization of prostate specific membrane antigen.

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The above-described biological agents (i.e., biological agents, such as an antibody or binding portion thereof, probe, or ligand which, when contacted with an extracellular domain of prostate specific membrane antigen, recognizes the extracellular domain of prostate 10 specific membrane antigen and, preferably, is internalized therewith) can be used to ablate or kill cancerous cells. In this aspect of the present invention, the biological agent can be used alone or can be bound to a substance effective to kill the cancerous 15 cells upon binding of the biological agent to vascular endothelial cells proximate thereto. These biological agents are contacted with vascular endothelial cells proximate to the cancerous cells. The contacting is carried out under conditions that are effective to permit 20 binding of the biological agent to the vascular endothelial cells proximate to the cancerous cells and, in addition, that are effective to kill or ablate the cancerous cells. The mechanism by which the cancerous cells are killed or ablated is not critical to the practice of the present invention. For example, the 25 cancerous cells can be killed or ablated directly by the biological agent as a consequence of their proximity to the vascular endothelial cells to which the biological agent binds. Alternatively, the biological agent can 30 kill, ablate, or otherwise change the properties of the vascular endothelial cells to which it binds so that blood flow to the cancerous cells proximate thereto is stopped or otherwise reduced, thereby causing the cancerous cells to be killed or ablated. Thus, the method of the present invention is particularly useful 35 for killing or ablating vascular endothelial cells in

cancerous tissue as well as the cancerous cells contained in cancerous tissue.

In a particularly preferred embodiment of the method of ablating or killing cancerous cells in accordance with the present invention, the biological 5 agent employed is one that, when contacted with an extracellular domain of prostate specific membrane antigen, binds to and is internalized with the extracellular domain of prostate specific membrane 10 antigen. The methods of the present invention are particularly useful to kill or ablate cancerous prostate epithelial cells as well as cancerous cells other than cancerous prostate epithelial cells. Examples of cancerous cells which are not cancerous prostate epithelial cells are renal, urothelial, colon, rectal, 15 lung, and breast cancerous cells and cancerous cells of metastatic adenocarcinoma to the liver. Although the method of the present invention can be used to kill or ablate any cell which expresses an extracellular domain of prostate specific membrane antigen or a portion 20 thereof or whose subsistence is dependent upon cells which express an extracellular domain of prostate specific membrane antigen or a portion thereof, the method of the present invention is particularly useful to 25 kill or ablate cancerous cells, because the vascular endothelial cells supplying blood to cancerous tissues (e.g., tumors, collections of cancerous cells, or other cancerous masses) express an extracellular domain of prostate specific membrane antigen, irrespective of the 30 type of cancer involved. In contrast, vascular endothelial cells supplying blood to normal tissues do not express an extracellular domain of prostate specific membrane antigen.

Another aspect of the present invention relates 35 to a method of detecting normal, benign hyperplastic, and cancerous epithelial cells or portions thereof in a biological sample. This method involves providing a - 18 -

biological agent, such as an antibody or binding portion thereof, probe, or ligand, which binds to an extracellular domain of prostate specific membrane antigen of such cells. The biological agent is bound to a label effective to permit detection of the cells or 5 portions (e.g., prostate specific membrane antigen or fragments thereof liberated from such normal, benign hyperplastic, and cancerous cells) thereof upon binding of the biological agent to the cells or portions thereof. The biological sample is contacted with the biological 10 agent having a label under conditions effective to permit binding of the biological agent to the extracellular domain of the prostate specific membrane antigen of any of the cells or portions thereof in the biological The presence of any cells or portions thereof in 15 the biological sample is detected by detection of the In its preferred form, such contacting is carried out in a living mammal and involves administering the biological agent to the mammal under conditions effective to permit binding of the biological agent to the prostate 20 specific membrane antigen of any of the cells or portions thereof in the biological sample. Again, such administration can be carried out orally or parenterally.

The method of the present invention can be used to screen patients for diseases associated with the 25 presence of normal, benign hyperplastic, and cancerous epithelial cells or portions thereof. Alternatively, it can be used to identify the recurrence of such diseases, particularly when the disease is localized in a particular biological material of the patient. 30 example, recurrence of prostatic disease in the prostatic fossa may be encountered following radical prostatectomy. Using the method of the present invention, this recurrence can be detected by administering a short range radiolabeled antibody to the mammal and then detecting 35 the label rectally, such as with a transrectal detector probe.

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Alternatively, the contacting step can be carried out in a sample of serum or urine or other body fluids, such as to detect the presence of PSMA in the body fluid. When the contacting is carried out in a serum or urine sample, it is preferred that the biological agent recognize substantially no antigens circulating in the blood other than PSMA. Since intact prostate cells do not excrete or secrete PSMA into the extracellular environment, detecting PSMA in serum, urine, or other body fluids generally indicates that prostate cells are being lysed. Thus, the biological agents and methods of the present invention can be used to determine the effectiveness of a prostate cancer treatment protocol by monitoring the level of PSMA in serum, urine or other body fluids.

In a particularly preferred embodiment of the method of detecting normal, benign hyperplastic, and cancerous prostate epithelial cells in accordance with the present invention, the biological agent, such as the antibody or binding portion thereof, probe, or ligand, binds to and is internalized with the prostate specific membrane antigen of such cells. Again, the biological agent is bound to a label effective to permit detection of the cells or portions thereof upon binding of the biological agent with the prostate specific membrane antigen.

Another aspect of the present invention relates to a method of detecting cancerous tissue in a biological sample. This method involves providing the above-described biological agent (i.e., a biological agent, such as an antibody or binding portion thereof, probe, or ligand which, when contacted with an extracellular domain of prostate specific membrane antigen, recognizes the extracellular domain of prostate specific membrane antigen). The biological agent is bound to a label that is effective to permit detection of vascular endothelial cells proximate to or within the cancerous tissue upon

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binding of the biological agent to vascular endothelial cells proximate to or within the cancerous tissue. The biological sample is then contacted with the biological agent having a label. Contacting is carried out under conditions effective to permit binding of the biological agent to the vascular endothelial cells proximate to or within the cancerous tissue in the biological sample. The presence of cancerous cells or portions thereof in the biological sample is detected by detection of the label.

Rather than contacting the entire biological sample with the biological agent, it is contemplated that a portion of the biological sample can be used. example, a tissue biopsy sample can be contacted with the biological agent to determine the presence of cancerous tissue in the tissue biopsy sample as well as in the larger biological sample from which it is taken. Alternatively, the biological agent can be contacted with a serum or urine sample to acertain whether any vascular endothelial cells expressing an extracellular domain of prostate specific membrane antigen are present therein. Since vascular endothelial cells expressing an extracellular domain of prostate specific membrane antigen are found in the vasculature of cancerous tissues but not in the vasculature of normal tissues, detection of the label in a serum or urine sample indicates the presence of cancerous tissue in the larger biological sample from which it is taken (e.g., a patient).

In a particularly preferred embodiment of the method of detecting cancerous tissues in accordance with the present invention, the biological agent employed is one that, when contacted with an extracellular domain of prostate specific membrane antigen, binds to and is internalized with the prostate specific membrane antigen. The methods of the present invention can be used to detect cancerous prostate epithelial cells as well as cancerous tissues containing cancerous cells other than

cancerous prostate epithelial cells. Examples of cancerous tissues containing cancerous cells other than cancerous prostate epithelial cells which can be detected with the methods of the present invention include renal, urothelial, colon, rectal, lung, and breast cancerous tissue and cancerous tissue of metastatic adenocarcinoma to the liver.

As indicated above, biological agents suitable for either killing, ablating, or detecting cancerous cells and normal, benign hyperplastic, and cancerous 10 prostate epithelial cells include antibodies, such as monoclonal or polyclonal antibodies. In addition, antibody fragments, half-antibodies, hybrid derivatives, probes, and other molecular constructs may be utilized. 15 These biological agents, such as antibodies, binding portions thereof, probes, or ligands, bind to extracellular domains of prostate specific membrane antigens or portions thereof in normal, benign hyperplastic, and cancerous prostate epithelial cells. As a result, when practicing the methods of the present 20 invention to kill, ablate, or detect normal, benign hyperplastic, and cancerous prostate epithelial cells, the biological agents bind to all such cells, not only to cells which are fixed or cells whose intracellular 25 antigenic domains are otherwise exposed to the extracellular environment. Consequently, binding of the biological agents is concentrated in areas where there are prostate epithelial cells, irrespective of whether these cells are fixed or unfixed, viable or necrotic. 30 Additionally or alternatively, these biological agents, such as antibodies, binding portions thereof, probes, or ligands, bind to and are internalized with prostate specific membrane antigens or portions thereof in normal, benign hyperplastic, and cancerous prostate epithelial 35 cells.

Monoclonal antibody production may be effected by techniques which are well-known in the art.

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Basically, the process involves first obtaining immune cells (lymphocytes) from the spleen of a mammal (e.g., mouse) which has been previously immunized with the antigen of interest either in vivo or in vitro. antibody-secreting lymphocytes are then fused with (mouse) myeloma cells or transformed cells, which are capable of replicating indefinitely in cell culture, thereby producing an immortal, immunoglobulin-secreting The resulting fused cells, or hybridomas, are cultured, and the resulting colonies screened for the production of the desired monoclonal antibodies. Colonies producing such antibodies are cloned, and grown either in vivo or in vitro to produce large quantities of antibody. A description of the theoretical basis and practical methodology of fusing such cells is set forth in Kohler and Milstein, Nature 256:495 (1975), which is hereby incorporated by reference.

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Mammalian lymphocytes are immunized by in vivo immunization of the animal (e.g., a mouse) with the protein or polypeptide of the present invention. Such immunizations are repeated as necessary at intervals of up to several weeks to obtain a sufficient titer of antibodies. Following the last antigen boost, the animals are sacrificed and spleen cells removed.

Fusion with mammalian myeloma cells or other fusion partners capable of replicating indefinitely in cell culture is effected by standard and well-known techniques, for example, by using polyethylene glycol ("PEG") or other fusing agents (See Milstein and Kohler, Eur. J. Immunol. 6:511 (1976), which is hereby incorporated by reference). This immortal cell line, which is preferably murine, but may also be derived from cells of other mammalian species, including but not limited to rats and humans, is selected to be deficient in enzymes necessary for the utilization of certain nutrients, to be capable of rapid growth, and to have good fusion capability. Many such cell lines are known

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to those skilled in the art, and others are regularly described.

Procedures for raising polyclonal antibodies are also well known. Typically, such antibodies can be raised by administering the protein or polypeptide of the present invention subcutaneously to New Zealand white rabbits which have first been bled to obtain pre-immune The antigens can be injected at a total volume of 100 μ l per site at six different sites. Each injected material will contain synthetic surfactant adjuvant 10 pluronic polyols, or pulverized acrylamide gel containing the protein or polypeptide after SDS-polyacrylamide gel The rabbits are then bled two weeks electrophoresis. after the first injection and periodically boosted with 15 the same antigen three times every six weeks. A sample of serum is then collected 10 days after each boost. Polyclonal antibodies are then recovered from the serum by affinity chromatography using the corresponding antigen to capture the antibody. Ultimately, the rabbits 20 are euthenized with pentobarbital 150 mg/Kg IV. This and other procedures for raising polyclonal antibodies are disclosed in E. Harlow, et. al., editors, Antibodies: A Laboratory Manual (1988), which is hereby incorporated by reference.

In addition to utilizing whole antibodies, the processes of the present invention encompass use of binding portions of such antibodies. Such binding portions include Fab fragments, F(ab')₂ fragments, and Fv fragments. These antibody fragments can be made by conventional procedures, such as proteolytic fragmentation procedures, as described in J. Goding, Monoclonal Antibodies: Principles and Practice, pp. 98-118 (N.Y. Academic Press 1983), which is hereby incorporated by reference.

Alternatively, the processes of the present invention can utilize probes or ligands found either in nature or prepared synthetically by recombinant DNA

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procedures or other biological or molecular procedures. Suitable probes or ligands are molecules which bind to the extracellular domains of prostate specific membrane antigens identified by the monoclonal antibodies of the present invention. Other suitable probes or ligands are molecules which bind to and are internalized with prostate specific membrane antigens. Such probes or ligands can be, for example, proteins, peptides, lectins, or nucleic acid probes.

It is particularly preferred to use the monoclonal antibodies identified below in Table 1.

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TABLE 1

15	Monoclonal Antibody Name	ATCC Designation for Hybridoma Cell Line
	E99 J415	HB-12101 HB-12109
20	J533 J591	HB-12127 HB-12126

These antibodies can be used alone or as a component in a mixture with other antibodies or other biological agents to treat cancers or image cancerous tissues (particularly the vascular endothelial cells therein) or prostate epithelial cells with varying surface antigen characteristics.

Regardless of whether the biological agents are used for treatment or diagnosis, they can be administered 30 orally, parenterally, subcutaneously, intravenously, intramuscularly, intraperitoneally, by intranasal instillation, by intracavitary or intravesical instillation, intraocularly, intraarterially, intralesionally, or by application to mucous membranes, 35 such as, that of the nose, throat, and bronchial tubes. They may be administered alone or with pharmaceutically or physiologically acceptable carriers, excipients, or stabilizers, and can be in solid or liquid form such as,

tablets, capsules, powders, solutions, suspensions, or emulsions.

The solid unit dosage forms can be of the conventional type. The solid form can be a capsule, such as an ordinary gelatin type containing the biological agent, such as an antibody or binding portion thereof, of the present invention and a carrier, for example, lubricants and inert fillers such as, lactose, sucrose, or cornstarch. In another embodiment, these compounds are tableted with conventional tablet bases such as lactose, sucrose, or cornstarch in combination with binders like acacia, cornstarch, or gelatin, disintegrating agents such as, cornstarch, potato starch, or alginic acid, and a lubricant like stearic acid or magnesium stearate.

The biological agent of the present invention may also be administered in injectable dosages by solution or suspension of these materials in a physiologically acceptable diluent with a pharmaceutical 20 Such carriers include sterile liquids such as water and oils, with or without the addition of a surfactant and other pharmaceutically and physiologically acceptable carrier, including adjuvants, excipients or stabilizers. Illustrative oils are those of petroleum, animal, vegetable, or synthetic origin, for example, 25 peanut oil, soybean oil, or mineral oil. In general, water, saline, aqueous dextrose and related sugar solution, and glycols such as, propylene glycol or polyethylene glycol, are preferred liquid carriers, 30 particularly for injectable solutions.

For use as aerosols, the biological agent of the present invention in solution or suspension may be packaged in a pressurized aerosol container together with suitable propellants, for example, hydrocarbon propellants like propane, butane, or isobutane with conventional adjuvants. The materials of the present WO 98/03873 PCT/US97/12035 -

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invention also may be administered in a non-pressurized form such as in a nebulizer or atomizer.

The biological agents may be utilized to detect cancerous tissues (particularly the vascular endothelial cells therein) and normal, benign hyperplastic, and cancerous prostate epithelial cells in vivo. This is achieved by labeling the biological agent, administering the labeled biological agent to a mammal, and then imaging the mammal.

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Examples of labels useful for diagnostic 10 imaging in accordance with the present invention are radiolabels such as 131 I, 111 In, 123 I, 99mTc, 32 P, 125 I, 3H, 14C, and 188Rh, fluorescent labels such as fluorescein and rhodamine, nuclear magnetic resonance active labels, 15 positron emitting isotopes detectable by a positron emission tomography ("PET") scanner, chemiluminescers such as luciferin, and enzymatic markers such as peroxidase or phosphatase. Short-range radiation emitters, such as isotopes detectable by short-range detector probes, such as a transrectal probe, can also be 20 employed. These isotopes and transrectal detector probes, when used in combination, are especially useful in detecting prostatic fossa recurrences and pelvic nodal The biological agent can be labeled with such 25 reagents using techniques known in the art. For example, see Wensel and Meares, Radioimmunoimaging and Radioimmunotherapy, Elsevier, New York (1983), which is hereby incorporated by reference, for techniques relating to the radiolabeling of antibodies. See also, D. Colcher 30 et al.. "Use of Monoclonal Antibodies as Radiopharmaceuticals for the Localization of Human Carcinoma Xenografts in Athymic Mice", Meth. Enzymol. 121: 802-816 (1986), which is hereby incorporated by reference.

A radiolabeled biological agent of this invention can be used for *in vitro* diagnostic tests. The specific activity of a tagged biological agent, such as a

tagged antibody, binding portion thereof, probe, or ligand, depends upon the half-life, the isotopic purity of the radioactive label, and how the label is incorporated into the biological agent. Table 2 lists several commonly-used isotopes, their specific activities and half-lives. In immunoassay tests, the higher the specific activity, in general, the better the sensitivity.

10	TABLE	2

15	<u>Isotope</u>	Specific Activity of Pure Isotope (Curies/mole)	<u> Half-Life</u>
20	14C 3H 35S 125I 32P 131I	6.25×10^{1} 2.01×10^{4} 1.50×10^{6} 2.18×10^{6} 3.16×10^{6} 1.62×10^{7}	5720 years 12.5 years 87 days 60 days 14.3 days 8.1 days

Procedures for labeling biological agents with the radioactive isotopes listed in Table 2 are generally 25 known in the art. Tritium labeling procedures are described in U.S. Patent No. 4,302,438, which is hereby incorporated by reference. Iodinating, tritium labeling, and 35S labeling procedures especially adapted for murine monoclonal antibodies are described by Goding, J.W. 30 (supra, pp 124-126) and the references cited therein. which are hereby incorporated by reference. Other procedures for iodinating biological agents, such as antibodies, binding portions thereof, probes, or ligands, 35 are described by Hunter and Greenwood, Nature 144:945 (1962), David et al., <u>Biochemistry</u> 13:1014-1021 (1974), and U.S. Patent Nos. 3,867,517 and 4,376,110, which are hereby incorporated by reference. Radiolabeling elements which are useful in imaging include 123 I, 131 I, 111 In, and 99mTc, for example. Procedures for iodinating biological 40 agents are described by Greenwood, F. et al., Biochem. J. 89:114-123 (1963); Marchalonis, J., Biochem. J. 113:299-305 (1969); and Morrison, M. et al.,

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Immunochemistry, 289-297 (1971), which are hereby incorporated by reference. Procedures for 99mTc-labeling are described by Rhodes, B. et al. in Burchiel, S. et al. (eds.), Tumor Imaging: The Radioimmunochemical Detection of Cancer, New York: Masson 111-123 (1982) and the references cited therein, which are hereby incorporated by reference. Procedures suitable for ""In-labeling biological agents are described by Hnatowich, D.J. et al., J. Immul. Methods, 65:147-157 (1983), Hnatowich, D. et al., <u>J. Applied Radiation</u>, 35:554-557 (1984), and 10 Buckley, R. G. et al., <u>F.E.B.S.</u> 166:202-204 (1984), which are hereby incorporated by reference.

In the case of a radiolabeled biological agent, the biological agent is administered to the patient, is localized to the tumor bearing the antigen with which the 15 biological agent reacts, and is detected or "imaged" in vivo using known techniques such as radionuclear scanning using e.g., a gamma camera or emission tomography. e.g., A.R. Bradwell et al., "Developments in Antibody Imaging", Monoclonal Antibodies for Cancer Detection and 20 R.W. Baldwin et al., (eds.), pp. 65-85 (Academic Press 1985), which is hereby incorporated by reference. Alternatively, a positron emission transaxial tomography scanner, such as designated Pet VI located at Brookhaven National Laboratory, can be used where the 25 radiolabel emits positrons (e.g., 11C, 18F, 15O, and 13N).

Fluorophore and chromophore labeled biological agents can be prepared from standard moieties known in the art. Since antibodies and other proteins absorb light having wavelengths up to about 310 nm, the fluorescent moieties should be selected to have substantial absorption at wavelengths above 310 nm and preferably above 400 nm. A variety of suitable fluorescers and chromophores are described by Stryer, Science, 162:526 (1968) and Brand, L. et al., Annual Review of Biochemistry, 41:843-868 (1972), which are hereby incorporated by reference. The biological agents

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can be labeled with fluorescent chromophore groups by conventional procedures such as those disclosed in U.S. Patent Nos. 3,940,475, 4,289,747, and 4,376,110, which are hereby incorporated by reference.

One group of fluorescers having a number of the desirable properties described above are the xanthene dyes, which include the fluoresceins derived from 3,6-dihydroxy-9-henylxanthhydrol and resamines and rhodamines derived from 3,6-diamino-9-phenylxanthydrol and lissanime rhodamine B. The rhodamine and fluorescein derivatives of 9-o-carboxyphenylxanthhydrol have a 9-o-carboxyphenyl group. Fluorescein compounds having reactive coupling groups such as amino and isothiocyanate groups such as fluorescein isothiocyanate and fluorescamine are readily available. Another group of fluorescent compounds are the naphthylamines, having an amino group in the α or β position.

Biological agents can be labeled with fluorchromes or chromophores by the procedures described by Goding, J. (supra, pp 208-249). The biological agents can be labeled with an indicating group containing the NMR-active 19F atom, or a plurality of such atoms inasmuch as (i) substantially all of naturally abundant fluorine atoms are the 19F isotope and, thus, substantially all fluorine-containing compounds are NMR-active; (ii) many chemically active polyfluorinated compounds such as trifluoracetic anhydride are commercially available at relatively low cost, and (iii) many fluorinated compounds have been found medically acceptable for use in humans such as the perfluorinated polyethers utilized to carry oxygen as hemoglobin replacements. After permitting such time for incubation, a whole body NMR determination is carried out using an apparatus such as one of those described by Pykett, Scientific American, 246:78-88 (1982), which is hereby incorporated by reference, to locate and image cancerous tissues (particularly the

vascular endothelial cells therein) and prostate epithelial cells.

In cases where it is important to distinguish between regions containing live and dead prostate 5 epithelial cells or to distinguish between live and dead prostate epithelial cells, the antibodies of the present invention (or other biological agents of the present invention), labeled as described above, can be coadministered along with an antibody or other biological agent which recognizes only living or only dead prostate 10 epithelial cells labeled with a label which can be distinguished from the label used to label the subject antibody. By monitoring the concentration of the two labels at various locations or times, spatial and 15 temporal concentration variations of living and dead normal, benign hyperplastic, and cancerous prostate epithelial cells can be ascertained. In particular, this method can be carried out using the labeled antibodies of the present invention, which recognize both living and dead epithelial prostate cells, and labeled 7E11 20 antibodies, which recognize only dead epithelial prostate cells.

The biological agents can also be utilized to kill or ablate cancerous cells and normal, benign hyperplastic, and cancerous prostate epithelial cells in 25 This involves using the biological agents by themselves or with a cytotoxic drug to which the biological agents of the present invention (i.e., biological agents recognizing normal, benign hyperplastic, and cancerous prostate epithelial cells) 30 are bound. This involves administering the biological agents bonded to a cytotoxic drug to a mammal requiring such treatment. In the case of normal, benign hyperplastic, and cancerous prostate epithelial cells, since the biological agents recognize prostate epithelial 35 cells, any such cells to which the biological agents bind are destroyed. Although such administration may destroy

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normal prostate epithelial cells, this is not problematic, because the prostate is not required for life or survival. Although the prostate may indirectly contribute to fertility, this is not likely to be a practical consideration in patients receiving the treatment of the present invention. In the case of cancerous tissues, since the biological agents recognize vascular endothelial cells that are proximate to cancerous cells, binding of the biological

agent/cytotoxic drug complex to these vascular endothelial cells destroys them, thereby cutting off the blood flow to the proximate cancerous cells and, thus, killing or ablating these cancerous cells.

Alternatively, the biological agents, by virtue of their binding to vascular endothelial cells that are proximate to cancerous cells, are localized proximate to the cancerous cells. Thus, by use of suitable biological agents (including those containing substances effective to kill cells nondiscriminatingly but only over a short range), cells in cancerous tissue (including cancerous cells) can be selectively killed or ablated.

The biological agents of the present invention may be used to deliver a variety of cytotoxic drugs including therapeutic drugs, a compound emitting radiation, molecules of plants, fungal, or bacterial origin, biological proteins, and mixtures thereof. The cytotoxic drugs can be intracellularly acting cytotoxic drugs, such as short-range radiation emitters, including, for example, short-range, high-energy α -emitters.

Enzymatically active toxins and fragments
thereof are exemplified by diphtheria toxin A fragment,
nonbinding active fragments of diphtheria toxin,
exotoxin A (from Pseudomonas aeruginosa), ricin A chain,
abrin A chain, modeccin A chain, α-sacrin, certain

Aleurites fordii proteins, certain Dianthin proteins,
Phytolacca americana proteins (PAP, PAPII and PAP-S),
Morodica charantia inhibitor, curcin, crotin, Saponaria

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officinalis inhibitor, gelonin, mitogillin, restrictocin, phenomycin, and enomycin, for example. Procedures for preparing enzymatically active polypeptides of the immunotoxins are described in W084/03508 and W085/03508. which are hereby incorporated by reference. Certain

cytotoxic moieties are derived from adriamycin, chlorambucil, daunomycin, methotrexate, neocarzinostatin, and platinum, for example.

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by reference.

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Procedures for conjugating the biological 10 agents with the cytotoxic agents have been previously described. Procedures for conjugating chlorambucil with antibodies are described by Flechner, I,. European Journal of Cancer, 9:741-745 (1973); Ghose, T. et al., British Medical Journal, 3:495-499 (1972); and Szekerke, M., et al., Neoplasma, 19:211-215 (1972), which are 15 hereby incorporated by reference. Procedures for conjugating daunomycin and adriamycin to antibodies are described by Hurwitz, E. et al., Cancer Research, 35:1175-1181 (1975) and Arnon, R. et al. Cancer Surveys, 1:429-449 (1982), which are hereby incorporated by 20 reference. Procedures for preparing antibody-ricin conjugates are described in U.S. Patent No. 4,414,148 and by Osawa, T., et al. Cancer Surveys, 1:373-388 (1982) and the references cited therein, which are hereby 25 incorporated by reference. Coupling procedures as also described in EP 86309516.2, which is hereby incorporated

In a particularly preferred embodiment of the present invention, especially well-suited for killing or ablating normal, benign hyperplastic, and cancerous prostate epithelial cells, a first biological agent is conjugated with a prodrug which is activated only when in close proximity with a prodrug activator. The prodrug activator is conjugated with a second biological agent according to the present invention, preferably one which binds to a non-competing site on the prostate specific membrane antigen molecule. Whether two biological agents

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bind to competing or non-competing binding sites can be determined by conventional competitive binding assays. For example, monoclonal antibodies J591, J533, and E99 bind to competing binding sites on the prostate specific membrane antigen molecule. Monoclonal antibody J415, on the other hand, binds to a binding site which is noncompeting with the site to which J591, J533, and E99 Thus, for example, the first biological agent can be one of J591, J533, and E99, and the second biological agent can be J415. Alternatively, the first biological agent can be J415, and the second biological agent can be one of J591, J533, and E99. Drug-prodrug pairs suitable for use in the practice of the present invention are described in Blakely et al., "ZD2767, an Improved System for Antibody-directed Enzyme Prodrug Therapy That Results in Tumor Regressions in Colorectal Tumor Xenografts," Cancer Research, 56:3287-3292 (1996), which is hereby incorporated by reference.

Alternatively, the biological agent can be 20 coupled to high energy radiation emitters, for example, a radioisotope, such as 131 I, a γ -emitter, which, when localized at the tumor site, results in a killing of several cell diameters. See, e.g., S.E. Order, "Analysis, Results, and Future Prospective of the 25 Therapeutic Use of Radiolabeled Antibody in Cancer Therapy", Monoclonal Antibodies for Cancer Detection and Therapy, R.W. Baldwin et al. (eds.), pp 303-316 (Academic Press 1985), which is hereby incorporated by reference. Other suitable radioisotopes include α -emitters, such as ²¹²Bi, ²¹³Bi, and ²¹¹At, and β -emitters, such as ¹⁸⁶Re and ⁹⁰Y. 30 Radiotherapy is expected to be particularly effective, because prostate epithelial cells and vascular endothelial cells within cancers are relatively radiosensitive.

Where the biological agents are used alone to kill or ablate cancerous cells or prostate epithelial cells, such killing or ablation can be effected by

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initiating endogenous host immune functions, such as complement-mediated or antibody-dependent cellular cytotoxicity.

The biological agent of the present invention can be used and sold together with equipment, as a kit, to detect the particular label.

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Biological agents of the present invention can be used in conjunction with other therapeutic treatment modalities. Such other treatments include surgery, radiation, cryosurgery, thermotherapy, hormone treatment, chemotherapy, vaccines, and other immunotherapies.

Also encompassed by the present invention is a method of killing or ablating which involves using the biological agents for prophylaxis. For example, these materials can be used to prevent or delay development or progression of prostate or other cancers.

Use of the therapeutic methods of the present invention to treat prostate and other cancers has a number of benefits. Since the biological agents according to the present invention only target cancerous cells (such as cells of cancerous tissues containing vascular endothelial cells) and prostate epithelial cells, other tissue is spared. As a result, treatment with such biological agents is safer, particularly for elderly patients. Treatment according to the present invention is expected to be particularly effective, because it directs high levels of biological agents, such as antibodies or binding portions thereof, probes, or ligands, to the bone marrow and lymph nodes where prostate cancer metastases and metastases of many other cancers predominate. Moreover, the methods of the present invention are particularly well-suited for treating prostate cancer, because tumor sites for prostate cancer tend to be small in size and, therefore, easily destroyed by cytotoxic agents. Treatment in accordance with the present invention can be effectively monitored with clinical parameters, such as, in the case

of prostate cancer, serum prostate specific antigen and/or pathological features of a patient's cancer, including stage, Gleason score, extracapsular, seminal, vesicle or perineural invasion, positive margins, involved lymph nodes, etc. Alternatively, these parameters can be used to indicate when such treatment should be employed.

Because the biological agents of the present invention bind to living prostate cells, therapeutic methods for treating prostate cancer using these 10 biological agents are much more effective than those which target lysed prostate cells. For the same reasons, diagnostic and imaging methods which determine the location of living normal, benign hyperplastic, or cancerous prostate epithelial cells (as well as vascular 15 endothelial cells within cancers) are much improved by employing the biological agents of the present invention. In addition, the ability to differentiate between living and dead prostate cells can be advantageous, especially to monitor the effectiveness of a particular treatment 20 regimen.

Hybridomas E99, J415, J533, and J591 have been deposited pursuant to, and in satisfaction of, the requirements of the Budapest Treaty on the International Recognition of the Deposit of Microorganisms for the Purposes of Patent Procedure with the American Type Culture Collection ("A.T.C.C.") at 12301 Parklawn Drive, Rockville, Maryland 20852. Hybridoma E99 was deposited on May 2, 1996, and received A.T.C.C. Designation Number HB-12101. Hybridoma J415 was deposited on May 30, 1996, and received A.T.C.C. Designation Number HB-12109. Hybridomas J533 and J591 were deposited on June 6, 1996, and received A.T.C.C. Designation Numbers HB-12127 and HB-12126, respectively.

The present invention is further illustrated by the following examples.

EXAMPLES

Example 1 -- Human Tissues

Fresh specimens of benign and malignant tissues
were obtained from the Department of Pathology of New
York Hospital Cornell University Medical Center ("NYHCUMC"),

Example 2 -- Tissue Culture

10 Cultured cell lines of human cancers were obtained from the Laboratory of Urological Oncology of NYH-CUMC. The prostate cancer cell lines PC-3 (Mickey, D.D., et al., "Characterization Of A Human Prostate Adenocarcinoma Cell Line (DU145) As A Monolayer Culture And As A Solid Tumor In Athymic Mice, " Prog. Clin. Biol. 15 Res., 37:67-84 (1980), which is hereby incorporated by reference), DU-145 (Mickey, D.D., et al., "Characterization Of A Human Prostate Adenocarcinoma Cell Line (DU145) As A Monolayer Culture And As A Solid Tumor In Athymic Mice, " Prog. Clin. Biol. Res., 37:67-84 20 (1980), which is hereby incorporated by reference), and LNCaP (Horoszewicz, J.S., et al., "LNCaP Model Of Human Prostatic Carcinoma, " Cancer Res., 43:1809-1818 (1983), which is hereby incorporated by reference) were obtained 25 from the American Type Culture Collection (Rockville, MD.). Hybridomas were initially cloned in RPMI-1640 medium supplemented with 10% FCS, 0.1 mM nonessential amino acids, 2mM L-glutamine, 100 units/ml of penicillin, 100 ug/ml of streptomycin and HAT medium (GIBCO, Grand Island, NY). Subclones were cultured in the same medium 30 without aminopterin.

Example 3 -- Preparation of Mouse Monoclonal Antibodies

Female BALB/c mice were immunized intraperitoneally with LNCaP (6x10⁶ cells) three times at 2 week intervals. A final intraperitoneal booster immunization was administered with fresh prostate

epithelial cells which had been grown in vitro. days later, spleen cells were fused with SP-2 mouse myeloma cells utilizing standard techniques (Ueda, R., et al., "Cell Surface Antigens Of Human Renal Cancer Defined By Mouse Monoclonal Antibodies: Identification Of Tissue-Specific Kidney Glycoproteins, " Proc. Natl. Acad. Sci. USA, 78:5122-5126 (1981), which is hereby incorporated by reference). Supernatants of the resulting clones were screened by rosette and complement cytotoxicity assays against viable LNCaP. Clones which 10 were positive by these assays were screened by immunochemistry vs normal kidney, colon, and prostate. Clones which were LNCap'/NmlKid'/colon'/prostate' were selected and subcloned 3 times by limiting dilution. 15 immunoglobulin class of cultured supernatant from each clone was determined by immunodiffusion using specified rabbit antisera (Calbiochem, San Diego, CA). mAbs were purified using the MAPS-II kit (Bio-Rad, Richmond, CA).

20 Example 4 -- Biotinylation of mAbs

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Purified mAbs were dialyzed in 0.1 M NaHCO₃ for 2 hours. One ml of mAb at 1 mg/ml was mixed with 0.1 ml of biotinamidocaproate N-hydroxysuccinamide ester (Sigma) in dimethylsulfoxide (1 mg/ml) and stirred for 4 hours at room temperature. Unbound biotin was removed by dialysis against phosphate buffered saline ("PBS").

Example 5 -- Immunohistochemical Staining of Prostate Tissues

Oryostat sections of prostate tissues were placed inside rings of Falcon 3034 plate covers (Becton-Dickenson, Lincoln Park, NJ) previously coated with 0.45% gelatin solution as described in Marusich, M.F., "A Rapid Method For Processing Very Large Numbers Of Tissue

Sections For Immunohistochemical Hybridoma Screening," J.

Immunol. Methods, 111:143-145 (1988), which is hereby incorporated by reference. Plates were stored at -80°C.

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Cryostat sections were fixed with 2% paraformaldehyde in PBS for 10 min at room temperature, and, after washing with PBS, endogenous peroxidase activity was blocked by treatment with 0.3% hydrogen peroxide in PBS for 10 min at room temperature. After sections were incubated with 2% BSA in PBS for 20 min, mAbs were added for 60 min at room temperature. Slides were extensively washed with PBS and incubated with peroxidase-conjugated rabbit antimouse Ig (DAKO Corp., Santa Barbara, CA) diluted 1:100 in 10% normal human serum in PBS for 60 min at room temperature. After a diaminobenzidine reaction, sections were counterstained with hematoxylin.

Example 6 -- Serological Analysis

The anti-mouse immunoglobulin mixed 15 hemadsorption assay was performed as described in Ueda, R., et al., "Cell Surface Antigens Of Human Renal Cancer Defined By Mouse Monoclonal Antibodies: Identification Of Tissue-Specific Kidney Glycoproteins," Proc. Natl. 20 Acad. Sci. USA, 78:5122-5126 (1981), which is hereby incorporated by reference. To prepare the indicator cells, anti-mouse Ig (DAKO Corp.) was conjugated to type O human RBC using 0.01% chromium chloride. Serological assays were performed on cells previously plated in Terasaki plates (Nunc, Denmark). Antibodies 25 were incubated with target cells at room temperature for 1 hour. Target cells were then washed, and indicator cells added for 1 hour.

30 Example 7 -- Immunoprecipitation

LNCaP cells (2 x 10⁷) were biotinylated with biotin-NHSS (at final concentration of 5mM) for 30 minutes on ice. After washing, the biotinylated cells were resuspended in 1 ml lysis buffer (20mM Tris/HCl pH 8.0, 1mM EDTA, 1mM PMSF, 1% triton X-100) for 30 min on ice. The suspension was centrifuged at 1500g x 100 min at 4°C, and the supernatant was centrifuged at 12,000 rpm

x 15 min at 4°C. The resulting lysate was preabsorbed with rabbit or goat anti-mouse IgG-coated pansorbin for 1 hour at 4°C. The pre-absorbed lysate was incubated with the mAb overnight at 4°C. Rabbit or goat anti-mouse Ig-5 coated agarose beads were added for 2 hours at 4°C and The beads were resuspended in Tristhen washed. base/NaCl, added to sample buffer with 2-mercaptoethanol, and boiled for 5 min. After centrifuging, the supernatant was run on an SDS-PAGE 12% gel. The gel was transferred to a nitrocellulose membrane which was blocked and stained with straptavidin-peroxidase. The membrane was developed with diaminobenzidine ("DAB").

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Sequential immunoprecipitation was similar except that the lysate was initially pre-cleared with one mAb overnight at 4°C. A second mAb was then used to immunoprecipitate the pre-cleared lysate.

Approximately 2000 clones were screened, of which four clones were selected as described in Example 3, above. After subcloning, supernatants from the 4 hybridomas, E99, J415, J533, and J591, were assayed by immunofluorescence against viable (i.e. unfixed) LNCaP, immunoprecipitation, and sequential immunoprecipitation to confirm reactivity to PSMA.

The immunofluorescence study using the LNCaP target cell (described originally in Horoszewicz, which 25 is hereby incorporated by reference, to make the 7E11 antibody and the prototype cell line for expression for PSMA) shows that E99 antibody binds to and renders viable LNCaP cells immunofluorescent. This is in contrast to the 7E11 antibody, which, as noted originally in 30 Horoszewicz, which is hereby incorporated by reference, gives only poor or no binding to viable LNCaP cells but exhibits strong binding once the cells are fixed (killed).

The reactivities of the four mAbs with normal 35 human tissues were examined immunohistochemically; these results are presented in Table 3.

TABLE 3								
Reactivity of mAbs with human normal tissues								
by indirect immunoperosidase staining								

	m:				
		99 γ₃)	$\begin{array}{c} \mathtt{J415} \\ (\gamma_1) \end{array}$	J533 (γ ₁)	J591 (γ ₁)
10					
	Prostate* Kidney	•	•	•	•
	Glomerulus	0	0	0	0
15	Prox. Tubule				
	Ureter	0	0	0	0
	Bladder	0	0	0	0
	Testis (0	0	0	0
<u></u>	Uterus '	0			
20	Esophagus	0	0	0	0
	Small Intestine	0	0	0	0
	Stomach	0	0	0	0
	Colon	0	0	0	0
	Spleen	0	0	0	0
25	Thyroid	0	0	0	0
•	Lung	0	0	0	0
	Pancreas	0	0	0	0
	Liver	0	0	0	0
30	* BPH * Prostate Cancer * LNCaP (scid) * LuCaP (scid)	0-3° 3° 0-3°	0-3° 0-3° 0-2°	0-4° 0-4° 4° 0-3°	0-4° 0-4° 4° 0-3°

• - positive; **=** - weak, heterogeneous; O - negative

The above sequential immunoprecipitaion study showed that 7E11, E99, J415, J533, and J591 bind to the same molecule, i.e. PSMA.

Example 8 -- Western Blot Analysis

To confirm that antibodies E99, J415, J533, and J591 precipitate an identical band to the 7E11 antibody (i.e., PSMA), Western Blot analyses were performed. Seminal plasma (400 μg/lane) or LNCaP lysate were loaded into lanes of 12% SDS-PAGE gels. After electrophoresis, the gels are transferred to nitrocellulose membranes. The membranes were blocked with 5% dry milk/Tris-buffered saline-tween 20 ("TBST") for 60 min at room temperature. After washing, the membranes were incubated with primary mAb for 60 min at room temperature. After repeat

washing, the membranes were incubated with sheep antimouse-Ig-peroxidase 1/5000 in 5% dry milk/TBST for 60 min at room temperature. After repeat washing, the membranes were developed using a chemiluminescent tag designated "ECL" (Amersham Life Sciences, International, Arlington Heights, Illinois) according to the manufacturer's directions. The results of the Western Blot experiment are presented in Table 4.

10 TABLE 4
Western blot data

	Sample	7E11	E99	J415	J533	J591
	Prostatic	100 KD				
15	(seminal)	band	band	band	band	band
•	fluid					
	LNCaP	100 KD &				
	cell lysate	200 KD				
		bands	bands	bands	bands	bands

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Example 9 -- mAb Reactivity to External Domain of PSMA

To confirm cell surface (external) expression of the detected PSMA, fresh, viable LNCaP cells were tested, without fixation, in vitro, by immunofluorescence. LNCaP cells were washed and incubated with mAb for 1 hour at room temperature and then with a rabbit anti-mouse Ig-fluorescein (DAKO Corp., Santa Barbara, CA). Wells were read with a fluorescent microscope. Negative control consisted of an isotypematched irrelevant mAb, while an anti-class I MHC mAb served as a positive control.

Immunofluorescence and rosette assay results are presented in Table 5.

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TABLE 5

Comparison of 7E11 with new mAbs

5	LNCaP viable cells	7E11	E99	J415	J533	J591
10	Immunofluor- escence	neg	3+	3+	4+	4+
10	Rosette assay	neg	+	+	+	+
	LNCaP-fixed	+++	++++	+++	++	+++

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Example 10 -- Competition Studies

A competition study was carried out to determine whether J591, J533, E99, and J415 detected the same or different antigenic sites (epitopes) of the prostate specific membrane antigen molecule using the following procedure.

Plates were coated with LNCaP cell line lysate as a source of prostate specific membrane antigen and washed to remove unbound material. "Cold" (unlabeled) 25 monoclonal antibody was incubated on the plate for 1 hour at room temperature to allow binding to its antigenic site. Subsequently, a second monoclonal antibody, labeled either with biotin or 125 I, was added for an additional hour. Plates were washed to remove unbound 30 material. The amount of the second monoclonal antibody bound to the prostate specific membrane antigen-coated plate was determined either by avidin-alkaline phosphatase in an enzyme-linked immunoassay (in the case of biotin-labeled second monoclonal antibody) or by 35 physically counting the well in a gamma counter (in the case of 125 I-labeled second monoclonal antibody). Controls consisted of using the same monoclonal antibody both cold and labeled to define "100% competition" or using monoclonal antibody to a totally different molecule 40 (e.g., monoclonal antibody I-56, which detects inhibin, a prostate related protein different from prostate specific membrane antigen) to define "0% competition".

The results indicated that J591, J533, and E99 each interfere, compete, or block binding of one another but do not block binding of J415 and vice versa.

7E11/CYT356, known to bind PSMA at a different (intracellular) site, did not block any of J591, J533, E99, or J415.

Having pairs of monoclonal antibodies which
bind to non-competing sites permits development of
antibody sandwich assays for detecting soluble antigens,
such as solubilized prostate specific membrane antigen or
fragment thereof, in, for example, body fluids. For
example, the antigen (e.g., prostate specific membrane
antigen or a fragment thereof) could be "captured" from
body fluid with J591 and, in another step, detected by
labeled J415.

In another setting, e.g. treatment, one could increase antibody binding by using a combination of noncompeting monoclonal antibodies. For example, assuming 20 the non-competing sites are each represented once on the prostate specific membrane antigen molecule, adding a combination of J591 plus J415 would bind twice as many monoclonal antibody molecules as either monoclonal 25 antibody alone. Binding two non-competing antigenic binding sites also can result in greater antigen crosslinking and, perhaps, increased internalization. Furthermore, since the two detected sites are physically located on the same prostate specific membrane antigen molecule, the binding of two monoclonal antibody 30 molecules to that single prostate specific membrane antigen molecule puts the two monoclonal antibody molecules in close proximity to each other, a setting which provides optimal drug-prodrug interaction. example, monoclonal antibody J591 can be conjugated with 35 an inactive pro-drug and J415 can be conjugated with a pro-drug activator. Since prodrug and activator would be bound in close proximity only at the site of prostate specific membrane antigen-expressing cells (e.g., prostate cancer cells), prodrug activation to the active form would occur only at those sites.

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Example 11 -- Microscopy

Confocal microscopy and immuno-electron microscopy demonstrated that E99, J591, J533, and J415 are bound to the cell membrane at clathrin-coated pits and then rapidly internalize into endosomes (cytoplasmic vesicles). Figures 1-4 are immuno-electron micrographs which follow the interaction of gold-labeled monoclonal antibody J591 with the cell surface as a function of time. In these figures, the location of the monoclonal antibody is indicated by the black dots.

Viable LNCaP cells were incubated with J591 for one hour at 4°C. The cells were washed and then held at 37°C for 0, 5, 10, or 15 minutes, after which time they were fixed and processed for immuno-electron microscopy. Figure 1 shows the cell prior to 37°C incubation. 20 can be seen bound to the cell along the external aspect of the cell membrane. In this Figure, "M" denotes the cell's mitochondria, and "N" denotes its nucleus. 2 shows the cell after incubation at 37°C for 5 minutes. The arrow indicates formation of a clathrin-coated pit. 25 In Figure 3, which shows the cell after a 10 minute 37°C incubation, pinching off or endocytosis of the clathrincoated pit can be seen, as indicated by the arrow. Figure 4 shows that, after incubation at 37°C for 15 minutes, monoclonal antibody J591 is contained in 30 endocytic vesicles within the cell, as indicated by the arrows. As can be seen in Figure 5, after incubation at 37°C for 15 minutes, monoclonal antibody J591 is also contained within endosomes, as indicated by the arrows.

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Example 12 -- Sequencing of the Variable Region of Monoclonal Antibody J591

Total RNA was prepared from 10' murine hybridoma J591 cells. A sample of the conditioned medium from these cells was tested for binding to the specific antigen for J591 on prostate cells. The conditioned medium was positive by both ELISA and Western Blot for binding to the antigen.

VH and VK cDNA were prepared using reverse transcriptase and mouse K constant region and mouse IgG constant region primers. The first strand cDNAs were amplified by PCR using a variety of mouse signal sequence primers (6 for VH and 7 for VK). The amplified DNAs were gel-purified and cloned into the vector pT7Blue.

The VH and VK clones obtained were screened for correct inserts by PCR, and the DNA sequence of selected clones was determined by the dideoxy chain termination method.

20 Excluding the primer region (as the sequence of this depended on the sequence of the primer that was used), all the VH clones obtained gave identical sequence. This sequence was obtained from clones produced with three different 5' primers. One clone had one base pair change within the signal sequence, and one 25 clone contained an aberrant PCR product. Using the sequencing strategy shown in Figure 6, the nucleotide sequence for the heavy chain was obtained. designated SEQ. ID. No. 1 and is presented in Figure 7, along with the nucleotide sequence of the corresponding 30 reverse, non-coding strand (designated SEQ. ID. No. 2). These sequences include part of the signal sequence and part of the constant region of the antibody. corresponding deduced amino acid sequences of J591 VH, 35 designated SEQ. ID. No. 3, SEQ. ID. No. 4, and SEQ. ID. No. 5, are also shown in Figure 7. The coding strand of the J591 heavy chain's variable region (exclusive of signal sequence and constant region components) has the

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following nucleotide sequence (designated SEQ. ID. No. 6):

GAGGTCCAGCTGCAACAGTCTGGACCTGAACTGGTGAAGCCTGGGACTTCAGTGAGG
ATATCCTGCAAGACTTCTGGATACACATTCACTGAATATACCATACACTGGGTGAAG
CAGAGCCATGGAAAGAGCCTTGAGTGGATTGGAAACATCAATCCTAACAATGGTGGT
ACCACCTACAATCAGAAGTTCGAGGACAAGGCCACATTGACTGTAGACAAGTCCTCC
AGTACAGCCTACATGGAGCTCCGCAGCCTAACATCTGAGGATTCTGCAGTCTATTAT
TGTGCAGCTGGTTGGAACTTTGACTACTGGGGCCCAAGGCACCACTCTCACAGTCTCC
TCA

The reverse, non-coding strand of the J591 heavy chain's variable region (exclusive of signal sequence and constant region components) has the following nucleotide sequence (designated SEQ. ID. No. 7):

TGAGGAGACTGTGAGAGTGGTGCCTTGGCCCCAGTAGTCAAAGTTCCAACCAGCTGC
ACAATAATAGACTGCAGAATCCTCAGATGTTAGGCTGCGGAGCTCCATGTAGGCTGT
ACTGGAGGACTTGTCTACAGTCAATGTGGCCTTGTCCTCGAACTTCTGATTGTAGGT
20 GGTACCACCATTGTTAGGATTGATGTTTCCAATCCACTCAAGGCTCTTTCCATGGCT
CTGCTTCACCCAGTGTATGGTATATTCAGTGAATGTGTATCCAGAAGTCTTGCAGGA
TATCCTCACTGAAGTCCCAGGCTTCACCAGTTCAGGTCCAGACTGTTGCAGGACCTCC

- The protein sequence corresponding to the J591 heavy chain's variable region (exclusive of signal sequence and constant region components) has the following nucleotide sequence (designated SEQ. ID. No. 8):
- 30 EVQLQQSGPELVKPGTSVRISCKTSGYTFTEYTIHWVKQSHGKSLEWIGNINPNNGG TTYNQKFEDKATLTVDKSSSTAYMELRSLTSEDSAVYYCAAGWNFDYWGQGTTLTVS S

The J591 VH is in Mouse Heavy Chains Subgroup

IIA (Kabat et al., <u>Sequences of Proteins of Immunological</u>

Interest, U.S. Department of Health and Human Services

(1991) ("Kabat"), which is hereby incorporated by

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reference). The sequence of J591 VH is compared to the consensus sequence for this subgroup in Figure 8.

In contrast to the VH, more than one VK sequence was obtained. Out of the 15 VK clones examined, four gave the sequence of an aberrant mouse $\lg \kappa$ from the fusion partner (Carol et al., Molecular Immunology, 25:991-995 (1988), which is hereby incorporated by reference). These clones originated from two specific 5' primers. No further work was done with these clones. 10 the remaining clones, ten gave identical nucleotide sequences, and one clone, VK17, gave an alternative VK sequence. The ten identical clones originated from three 5' primers (different from the two that gave the aberrant sequence), one of which also produced VK17. sequencing strategy that was employed is shown in Figure 9. .

The nucleic acid sequence of J591 VK corresponding to the ten identical clones (designated SEQ. ID. No. 9) is presented in Figure 10, along with the nucleic acid sequence of the corresponding reverse, noncoding strand (designated SEQ. ID. No. 10) and the deduced amino acid sequences, which are designated SEQ. ID. No. 11, SEQ. ID. No. 12, and SEQ. ID. No. 13. sequences include part of the signal sequence and part of the constant region of the antibody. The coding strand of the J591 light (kappa) chain's variable region (exclusive of signal sequence and constant region components) corresponding to the ten identical clones has the following nucleotide sequence (designated SEQ. ID. No. 14):

AACATTGTAATGACCCAATCTCCCAAATCCATGTCCATGTCAGTAGGAGAGGGGTC ACCTTGACCTGCAAGGCCAGTGAGAATGTGGTTACTTATGTTTCCTGGTATCAACAG AAACCAGAGCAGTCTCCTAAACTGCTGATATACGGGGCATCCAACCGGTACACTGGG GTCCCCGATCGCTTCACAGGCAGTGGATCTGCAACAGATTTCACTCTGACCATCAGC AGTGTGCAGGCTGAAGACCTTGCAGATTATCACTGTGGACAGGGTTACAGCTATCCG TACACGTTCGGAGGGGGGACCAAGCTGGAAATAAAA

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The reverse, non-coding strand of the J591 light (kappa) chain's variable region (exclusive of signal sequence and constant region components) corresponding to the ten identical clones has the following nucleotide sequence (designated SEQ. ID. No. 15):

TTTTATTTCCAGCTTGGTCCCCCCCCCGAACGTGTACGGATAGCTGTAACCCTGTCC
ACAGTGATAATCTGCAAGGTCTTCAGCCTGCACACTGCTGATGGTCAGAGTGAAATC
TGTTGCAGATCCACTGCCTGTGAAGCGATCGGGGACCCCAGTGTACCGGTTGGATGC
CCCGTATATCAGCAGTTTAGGAGACTGCTCTGGTTTCTGTTGATACCAGGAAACATA
AGTAACCACATTCTCACTGGCCTTGCAGGTCAAGGTGACCCTCTCTCCTACTGACAT
GGACATGGATTTGGGAGATTGGGTCATTACAATGTT

The protein sequence corresponding to the J591 light

(kappa) chain's variable region (exclusive of signal sequence and constant region components) corresponding to the ten identical clones has the following nucleotide sequence (designated SEQ. ID. No. 16):

20 NIVMTQSPKSMSMSVGERVTLTCKASENVVTYVSWYQQKPEQSPKLLIYGASNRYTG VPDRFTGSGSATDFTLTISSVQAEDLADYHCGQGYSYPYTFGGGTKLEIK

The coding strand of the J591 light (kappa) chain's variable region (exclusive of signal sequence and constant region components) corresponding to clone VK17 has the following nucleotide sequence (designated SEQ. ID. No. 17):

GACATTGTGATGACCCAGTCTCACAAATTCATGTCCACATCAGTAGGAGACAGGGTC
AGCATCATCTGTAAGGCCAGTCAAGATGTGGGTACTGCTGTAGACTGGTATCAACAG
AAACCAGGACAATCTCCTAAACTACTGATTTATTGGGCATCCACTCGGCACACTGGA
GTCCCTGATCGCTTCACAGGCAGTGGATCTGGGACAGACTTCACTCTCACCATTACT
AATGTTCAGTCTGAAGACTTGGCAGATTATTTCTGTCAGCAATATAACAGCTATCCT
CTCACGTTCGGTGCTGGGACCATGCTGGACCTGAAA

The reverse, non-coding strand of the J591 light (kappa) chain's variable region (exclusive of signal sequence and

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constant region components) corresponding to clone VK17 has the following nucleotide sequence (designated SEQ. ID. No. 18):

TTTCAGGTCCAGCATGGTCCCAGCACCGAACGTGAGAGGATAGCTGTTATATTGCTG
ACAGAAATAATCTGCCAAGTCTTCAGACTGAACATTAGTAATGGTGAGAGTGAAGTC
TGTCCCAGATCCACTGCCTGTGAAGCGATCAGGGACTCCAGTGTGCCGAGTGGATGC
CCAATAAATCAGTAGTTTAGGAGATTGTCCTGGTTTCTGTTGATACCAGTCTACAGC
AGTACCCACATCTTGACTGGCCTTACAGATGATGCTGACCCTGTCTCCTACTGATGT

GGACATGAATTTGTGAGACTGGGTCATCACAATGTC

The protein sequence corresponding to the J591 light (kappa) chain's variable region (exclusive of signal sequence and constant region components) corresponding to clone VK17 has the following nucleotide sequence (designated SEQ. ID. No. 19):

DIVMTQSHKFMSTSVGDRVSIICKASQDVGTAVDWYQQKPGQSPKLLIYWASTRHTG VPDRFTGSGSGTDFTLTITNVQSEDLADYFCQQYNSYPLTFGAGTMLDLK

J591 VK is in the Mouse Kappa Chains Subgroup V (Kabat, which is hereby incorporated by reference). The sequence of J591 VK corresponding to the ten identical clones is compared to the consensus sequence for the subgroup in Figure 11.

Preferred J591's are those having heavy chain variable region DNA coding strand sequences corresponding to SEQ. ID. No. 6 and non-coding strand (reverse) sequences corresponding to SEQ. ID. No. 7. The heavy chain variable region of J591 preferably has an amino acid sequence corresponding to SEQ. ID. No. 8. The light chain variable region of J591 preferably has a DNA coding strand sequence corresponding to SEQ. ID. No. 17, a DNA non-coding strand (reverse) sequence corresponding to SEQ. ID. No. 18, and a amino acid sequence corresponding to SEQ. ID. No. 18, and a amino acid sequence corresponding to SEQ. ID. No. 19.

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Example 13 -- Immunohistochemical Staining of Normal and Cancer Tissues

Cancer tissues from 23 carcinomas were pre5 cooled in liquid nitrogen, snap-frozen in OCT compound
(Miles, Elkhart, Indiana) on dry ice, and stored at
-80°C. Cryostat tissue sections (5μm) were fixed in cold
acetone (4°C) for 10 minutes. mAbs (5 μg/ml or hybridoma
supernatants) were incubated for 1 hour at room
10 temperature. Antibody binding was detected using rabbit
anti-mouse Ig-peroxidase (Dako, Carpinteria, California)
as a secondary antibody and DAB (Sigma, St. Louis,
Missouri) as chromogen. Isotype-matched irrelevant
antibody was used as negative control.

mAbs J591, J533, J415, and E99 reacted strongly with vascular endothelia in all 23 carcinomas studied, including 9/9 renal, 5/5 urothelial, 6/6 colon, 1/1 lung, and 1/1 breast carcinomas, and 1/1 metastatic adenocarcinoma to the liver. Figures 2A-2F, respectively, show the immunohistochemical reactivity of mAb J591 to neovasculature of renal, urothelial, colon, lung, and breast carcinomas, and metastatic

Although the invention has been described in detail for the purpose of illustration, it is understood that such detail is solely for that purpose and variations can be made by those skilled in the art without departing from the spirit and scope of the

30 invention which is defined by the following claims.

adenocarcinoma to the liver.

SEQUENCE LISTING

- (1) GENERAL INFORMATION:
 - (i) APPLICANT: Cornell Research Foundation, Inc.
 - (ii) TITLE OF INVENTION: TREATMENT AND DIAGNOSIS OF CANCER
 - (iii) NUMBER OF SEQUENCES: 19
 - (iv) CORRESPONDENCE ADDRESS:
 - (A) ADDRESSEE: Nixon, Hargrave, Devans & Doyle LLP
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 - (C) CITY: Rochester
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 - (E) COUNTRY: U.S.A.
 - (F) ZIP: 14603-1051
 - (v) COMPUTER READABLE FORM:
 - (A) MEDIUM TYPE: Floppy disk
 - (B) COMPUTER: IBM PC compatible
 - (C) OPERATING SYSTEM: PC-DOS/MS-DOS
 - (D) SOFTWARE: PatentIn Release #1.0, Version #1.30
 - (vi) CURRENT APPLICATION DATA:
 - (A) APPLICATION NUMBER:
 - (B) FILING DATE:
 - (C) CLASSIFICATION:
 - (vii) PRIOR APPLICATION DATA:
 - (A) APPLICATION NUMBER: US 06/022,125
 - (B) FILING DATE: 18-JUL-1996
 - (vii) PRIOR APPLICATION DATA:
 - (A) APPLICATION NUMBER: US 08/838,632
 - (B) FILING DATE: 09-APR-1997
 - (viii) ATTORNEY/AGENT INFORMATION:
 - (A) NAME: Goldman, Michael L.
 - (B) REGISTRATION NUMBER: 30,727
 - (C) REFERENCE/DOCKET NUMBER: 19603/1174
 - (ix) TELECOMMUNICATION INFORMATION:
 - (A) TELEPHONE: (716) 263-1304
 - (B) TELEFAX: (716) 263-1600
- (2) INFORMATION FOR SEQ ID NO:1:
 - (i) SEQUENCE CHARACTERISTICS:

PCT/US97/12035 -

	(A) LENGTH: 391 base pairs(B) TYPE: nucleic acid(C) STRANDEDNESS: single(D) TOPOLOGY: linear	
	(ii) MOLECULE TYPE: cDNA	
	(xi) SEQUENCE DESCRIPTION: SEQ ID NO:1:	
TCTCCTGTCA	GGAACTGCAG GTGTCCTCTC TGAGGTCCAG CTGCAACAGT CTGGACCTGA	60
ACTGGTGAAG	CCTGGGACTT CAGTGAGGAT ATCCTGCAAG ACTTCTGGAT ACACATTCAC	120
TGAATATACC	ATACACTGGG TGAAGCAGAG CCATGGAAAG AGCCTTGAGT GGATTGGAAA	180
CATCAATCCT	AACAATGGTG GTACCACCTA CAATCAGAAG TTCGAGGACA AGGCCACATT	240
GACTGTAGAC	AAGTCCTCCA GTACAGCCTA CATGGAGCTC CGCAGCCTAA CATCTGAGGA	300
TTCTGCAGTC	TATTATTGTG CAGCTGGTTG GAACTTTGAC TACTGGGGCC AAGGCACCAC	360
TCTCACAGTC	TCCTCAGCCA AAACGACACC C	391
(2) INFOR	RMATION FOR SEQ ID NO:2:	
(i)	SEQUENCE CHARACTERISTICS: (A) LENGTH: 391 base pairs (B) TYPE: nucleic acid (C) STRANDEDNESS: single (D) TOPOLOGY: linear	
(ii)	MOLECULE TYPE: cDNA	
(xi)	SEQUENCE DESCRIPTION: SEQ ID NO:2:	
GGGTGTCGTT	TTGGCTGAGG AGACTGTGAG AGTGGTGCCT TGGCCCCAGT AGTCAAAGTT	60
CCAACCAGCT	GCACAATAAT AGACTGCAGA ATCCTCAGAT GTTAGGCTGC GGAGCTCCAT	120
GTAGGCTGTA	CTGGAGGACT TGTCTACAGT CAATGTGGCC TTGTCCTCGA ACTTCTGATT	180
GTAGGTGGTA	CCACCATTGT TAGGATTGAT GTTTCCAATC CACTCAAGGC TCTTTCCATG	240
GCTCTGCTTC	ACCCAGTGTA TGGTATATTC AGTGAATGTG TATCCAGAAG TCTTGCAGGA	300
TATCCTCACT	GAAGTCCCAG GCTTCACCAG TTCAGGTCCA GACTGTTGCA GCTGGACCTC	360
AGAGAGGACA	CCTGCAGTTC CTAGCAGGAG A	391
(2) INFO	RMATION FOR SEQ ID NO:3:	

(i) SEQUENCE CHARACTERISTICS:

(B) TYPE: amino acid(C) STRANDEDNESS:(D) TOPOLOGY: linear

(A) LENGTH: 123 amino acids

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(ii) MOLECULE TYPE: protein

(xi) SEQUENCE DESCRIPTION: SEQ ID NO:3:

Ser Pro Val Arg Asn Cys Arg Cys Pro Leu Gly Pro Ala Ala Thr Val 1 5 10 15

Trp Thr Thr Gly Glu Ala Trp Asp Phe Ser Glu Asp Ile Leu Gln Asp 20 25 30

Phe Trp Ile His Ile His Ile Tyr His Thr Leu Gly Glu Ala Glu Pro
35 40 45

Trp Lys Glu Pro Val Asp Trp Lys His Gln Ser Gln Trp Trp Tyr His 50 55 60

Leu Gln Ser Glu Val Arg Gly Gln Gly His Ile Asp Cys Arg Gln Val 65 70 75 80

Leu Gln Tyr Ser Leu His Gly Ala Pro Gln Pro Asn Ile Gly Phe Cys
85 90 95

Ser Leu Leu Cys Ser Trp Leu Glu Leu Leu Gly Pro Arg His

His Ser His Ser Leu Leu Ser Gln Asn Asp Thr 115 120

(2) INFORMATION FOR SEQ ID NO:4:

(i) SEQUENCE CHARACTERISTICS:

- (A) LENGTH: 130 amino acids
- (B) TYPE: amino acid
- (C) STRANDEDNESS:
- (D) TOPOLOGY: linear

(ii) MOLECULE TYPE: protein

(xi) SEQUENCE DESCRIPTION: SEQ ID NO:4:

Leu Leu Ser Gly Thr Ala Gly Val Leu Ser Glu Val Gln Leu Gln Gln
1 5 10 15

Ser Gly Pro Glu Leu Val Lys Pro Gly Thr Ser Val Arg Ile Ser Cys 20 25 30

Lys Thr Ser Gly Tyr Thr Phe Thr Glu Tyr Thr Ile His Trp Val Lys 35 40 45

Gln Ser His Gly Lys Ser Leu Glu Trp Ile Gly Asn Ile Asn Pro Asn 50 55 60

Asn Gly Gly Thr Thr Tyr Asn Gln Lys Phe Glu Asp Lys Ala Thr Leu 65 70 75 80

Thr Val Asp Lys Ser Ser Ser Thr Ala Tyr Met Glu Leu Arg Ser Leu 85 90 95

Thr Ser Glu Asp Ser Ala Val Tyr Tyr Cys Ala Ala Gly Trp Asn Phe
100 105 110

Asp Tyr Trp Gly Gln Gly Thr Thr Leu Thr Val Ser Ser Ala Lys Thr

Thr Pro 130

(2) INFORMATION FOR SEQ ID NO:5:

- (i) SEQUENCE CHARACTERISTICS:
 - (A) LENGTH: 125 amino acids
 - (B) TYPE: amino acid
 - (C) STRANDEDNESS:
 - (D) TOPOLOGY: linear
- (ii) MOLECULE TYPE: protein
- (xi) SEQUENCE DESCRIPTION: SEQ ID NO:5:

Leu Ser Cys Gln Glu Leu Gln Val Ser Ser Leu Arg Ser Ser Cys Asn

Ser Leu Asp Leu Asn Trp Ser Leu Gly Leu Gln Gly Tyr Pro Ala Arg

Leu Leu Asp Thr His Ser Leu Asn Ile Pro Tyr Thr Gly Ser Arg Ala

Met Glu Arg Ala Leu Ser Gly Leu Glu Thr Ser Ile Leu Thr Met Val

Val Pro Pro Thr Ile Arg Ser Ser Arg Thr Arg Pro His Leu Thr Ser

Pro Pro Val Gln Pro Thr Trp Ser Ser Ala Ala His Leu Arg Ile Leu

Gln Ser Ile Ile Val Gln Leu Val Gly Thr Leu Thr Thr Gly Ala Lys

Ala Pro Leu Ser Gln Pro Ser Gln Pro Lys Arg His Pro 120 115

(2) INFORMATION FOR SEQ ID NO:6:

- (i) SEQUENCE CHARACTERISTICS:
 - (A) LENGTH: 345 base pairs
 - (B) TYPE: nucleic acid
 - (C) STRANDEDNESS: single
 - (D) TOPOLOGY: linear
- (ii) MOLECULE TYPE: cDNA
- (xi) SEQUENCE DESCRIPTION: SEQ ID NO:6:

GAGGTCCAGC TGCAACAGTC TGGACCTGAA CTGGTGAAGC CTGGGACTTC AGTGAGGATA

60 120

TCCTGCAAGA CTTCTGGATA CACATTCACT GAATATACCA TACACTGGGT GAAGCAGAGC

CATGGAAAGA	GCCTTGAGTG	GATTGGAAAC	ATCAATCCTA	ACAATGGTGG	TACCACCTAC	180
AATCAGAAGT	TCGAGGACAA	GGCCACATTG	ACTGTAGACA	AGTCCTCCAG	TACAGCCTAC	240
ATGGAGCTCC	GCAGCCTAAC	ATCTGAGGAT	TCTGCAGTCT	ATTATTGTGC	AGCTGGTTGG	300
AACTTTGACT	ACTGGGGCCA	AGGCACCACT	CTCACAGTCT	CCTCA		345

(2) INFORMATION FOR SEQ ID NO:7:

(i) SEQUENCE CHARACTERISTICS:

- (A) LENGTH: 345 base pairs
- (B) TYPE: nucleic acid
- (C) STRANDEDNESS: single
- (D) TOPOLOGY: linear

(ii) MOLECULE TYPE: cDNA

(xi) SEQUENCE DESCRIPTION: SEQ ID NO:7:

TGAGGAGACT	GTGAGAGTGG	TGCCTTGGCC	CCAGTAGTCA	AAGTTCCAAC	CAGCTGCACA	60
ATAATAGACT	GCAGAATCCT	CAGATGTTAG	GCTGCGGAGC	TCCATGTAGG	CTGTACTGGA	120
GGACTTGTCT	ACAGTCAATG	TGGCCTTGTC	CTCGAACTTC	TGATTGTAGG	TGGTACCACC	180
ATTGTTAGGA	TTGATGTTTC	CAATCCACTC	AAGGCTCTTT	CCATGGCTCT	GCTTCACCCA	240
GTGTATGGTA	TATTCAGTGA	ATGTGTATCC	AGAAGTCTTG	CAGGATATCC	TCACTGAAGT	300
CCCAGGCTTC	ACCAGTTCAG	GTCCAGACTG	TTGCAGCTGG	ACCTC		345

(2) INFORMATION FOR SEQ ID NO:8:

- (i) SEQUENCE CHARACTERISTICS:
 - (A) LENGTH: 115 amino acids
 - (B) TYPE: amino acid
 - (C) STRANDEDNESS:
 - (D) TOPOLOGY: linear

(ii) MOLECULE TYPE: protein

(xi) SEQUENCE DESCRIPTION: SEQ ID NO:8:

Glu Val Gln Leu Gln Gln Ser Gly Pro Glu Leu Val Lys Pro Gly Thr
1 10 15

Ser Val Arg Ile Ser Cys Lys Thr Ser Gly Tyr Thr Phe Thr Glu Tyr 20 25 30

Thr Ile His Trp Val Lys Gln Ser His Gly Lys Ser Leu Glu Trp Ile 35 40 45

Gly Asn Ile Asn Pro Asn Asn Gly Gly Thr Thr Tyr Asn Gln Lys Phe 50 60

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Glu 65	Asp	Lys	Ala	Thr	Leu 70	Thr	Val	Asp		Ser 75	Ser	Ser	Thr	Ala	Tyr 80
Met	Glu	Leu	Arg	Ser 85	Leu	Thr	Ser	Glu	Asp 90	Ser	Ala	Val	Tyr	Tyr 95	Cys
Ala	Ala	Gly	Trp 100	Asn	Phe	Asp	Tyr	Trp 105	Gly	Gln	Gly	Thr	Thr 110	Leu	Thr
Val	Ser	Ser 115													

(2) INFORMATION FOR SEQ ID NO:9:

1 -	١,	SEOUENCE		TCTTCC.
١.	Ŀŀ	SECUENCE	CHARACIE	(TDTTCD)

- (A) LENGTH: 363 base pairs
- (B) TYPE: nucleic acid (C) STRANDEDNESS: single
- (D) TOPOLOGY: linear

(ii) MOLECULE TYPE: cDNA

(xi) SEQUENCE DESCRIPTION: SEQ ID NO:9:

TTATATGGAG	CTGATGGGAA	CATTGTAATG	ACCCAATCTC	CCAAATCCAT	GTCCATGTCA	60
GTAGGAGAGA	GGGTCACCTT	GACCTGCAAG	GCCAGTGAGA	ATGTGGTTAC	TTATGTTTCC	120
TGGTATCAAC	AGAAACCAGA	GCAGTCTCCT	AAACTGCTGA	TATACGGGGC	ATCCAACCGG	180
TACACTGGGG	TCCCCGATCG	CTTCACAGGC	AGTGGATCTG	CAACAGATTT	CACTCTGACC	240
ATCAGCAGTG	TGCAGGCTGA	AGACCTTGCA	GATTATCACT	GTGGACAGGG	TTACAGCTAT	300
CCGTACACGT	TCGGAGGGGG	GACCAAGCTG	GAAATAAAAC	GGGCTGATGC	TGCACCAACT	360
GTA						363

(2) INFORMATION FOR SEQ ID NO:10:

- (i) SEQUENCE CHARACTERISTICS:
 - (A) LENGTH: 363 base pairs

 - (B) TYPE: nucleic acid(C) STRANDEDNESS: single
 - (D) TOPOLOGY: linear

(ii) MOLECULE TYPE: cDNA

(xi) SEQUENCE DESCRIPTION: SEQ ID NO:10:

TACAGTTGGT	GCAGCATCAG	CCCGTTTTAT	TTCCAGCTTG	GTCCCCCTC	CGAACGTGTA	60
CGGATAGCTG	TAACCCTGTC	CACAGTGATA	ATCTGCAAGG	TCTTCAGCCT	GCACACTGCT	120
GATGGTCAGA	GTGAAATCTG	TTGCAGATCC	ACTGCCTGTG	AAGCGATCGG	GGACCCCAGT	180

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TAA						363
TACTGACATG	GACATGGATT	TGGGAGATTG	GGTCATTACA	ATGTTCCCAT	CAGCTCCATA	360
CCAGGAAACA	TAAGTAACCA	CATTCTCACT	GGCCTTGCAG	GTCAAGGTGA	CCCTCTCTCC	300
GTACCGGTTG	GATGCCCCGT	ATATCAGCAG	TTTAGGAGAC	TGCTCTGGTT	TCTGTTGATA	240

(2) INFORMATION FOR SEQ ID NO:11:

- (i) SEQUENCE CHARACTERISTICS:
 - (A) LENGTH: 121 amino acids
 - (B) TYPE: amino acid
 - (C) STRANDEDNESS:
 - (D) TOPOLOGY: linear
- (ii) MOLECULE TYPE: protein
- (xi) SEQUENCE DESCRIPTION: SEQ ID NO:11:

Leu Tyr Gly Ala Asp Gly Asn Ile Val Met Thr Gln Ser Pro Lys Ser

Met Ser Met Ser Val Gly Glu Arg Val Thr Leu Thr Cys Lys Ala Ser

Glu Asn Val Val Thr Tyr Val Ser Trp Tyr Gln Gln Lys Pro Glu Gln

Ser Pro Lys Leu Leu Ile Tyr Gly Ala Ser Asn Arg Tyr Thr Gly Val 50 60

Pro Asp Arg Phe Thr Gly Ser Gly Ser Ala Thr Asp Phe Thr Leu Thr

Ile Ser Ser Val Gln Ala Glu Asp Leu Ala Asp Tyr His Cys Gly Gln

Gly Tyr Ser Tyr Pro Tyr Thr Phe Gly Gly Gly Thr Lys Leu Glu Ile 105

Lys Arg Ala Asp Ala Ala Pro Thr Val

(2) INFORMATION FOR SEQ ID NO:12:

- (i) SEQUENCE CHARACTERISTICS:
 - (A) LENGTH: 114 amino acids
 - (B) TYPE: amino acid
 - (C) STRANDEDNESS:
 - (D) TOPOLOGY: linear
- (ii) MOLECULE TYPE: protein
- (xi) SEQUENCE DESCRIPTION: SEQ ID NO:12:

Tyr Met Glu Leu Met Gly Thr Leu Pro Asn Leu Pro Asn Pro Cys Pro

Cys Gln Glu Arg Gly Ser Pro Pro Ala Arg Pro Val Arg Met Trp Leu 20 25 30

Leu Met Phe Pro Gly Ile Asn Arg Asn Gln Ser Ser Leu Leu Asn Cys 35 40 45

Tyr Thr Gly His Pro Thr Gly Thr Leu Gly Ser Pro Ile Ala Ser Gln 50 60

Ala Val Asp Leu Gln Gln Ile Ser Leu Pro Ser Ala Val Cys Arg Leu 65 70 75 80

Lys Thr Leu Gln Ile Ile Thr Val Asp Arg Val Thr Ala Ile Arg Thr 85 90 95

Arg Ser Glu Gly Gly Pro Ser Trp Lys Asn Gly Leu Met Leu His Gln
100 105 110

Leu Tyr

(2) INFORMATION FOR SEQ ID NO:13:

- (i) SEQUENCE CHARACTERISTICS:
 - (A) LENGTH: 116 amino acids
 - (B) TYPE: amino acid
 - (C) STRANDEDNESS:
 - (D) TOPOLOGY: linear
- (ii) MOLECULE TYPE: protein
- (xi) SEQUENCE DESCRIPTION: SEQ ID NO:13:

Ile Ile Trp Ser Trp Glu His Cys Asn Asp Pro Ile Ser Gln Ile His
1 10 15

Val His Val Ser Arg Arg Glu Gly His Leu Asp Leu Gln Gly Gln Glu 20 25 30

Cys Gly Tyr Leu Cys Phe Leu Val Ser Thr Glu Thr Arg Ala Val Ser 35 40 45

Thr Ala Asp Ile Arg Gly Ile Gln Pro Val His Trp Gly Pro Arg Ser 50 55 60

Leu His Arg Gln Trp Ile Cys Asn Arg Phe His Ser Asp His Gln Gln 65 70 75 80

Cys Ala Gly Arg Pro Cys Arg Leu Ser Leu Trp Thr Gly Leu Gln Leu 85 90 95

Ser Val His Val Arg Arg Gly Asp Gln Ala Gly Asn Lys Thr Gly Cys
100 105 110

Cys Thr Asn Cys

(2) INFORMATION FOR SEQ ID NO:14:

- (i) SEQUENCE CHARACTERISTICS:
 - (A) LENGTH: 321 base pairs

	(B) TYPE: nucleic acid (C) STRANDEDNESS: single (D) TOPOLOGY: linear	
(ii) I	MOLECULE TYPE: cDNA	
(xi) :	SEQUENCE DESCRIPTION: SEQ ID NO:14:	
AACATTGTAA	TGACCCAATC TCCCAAATCC ATGTCCATGT CAGTAGGAGA GAGGGTCACC	60
TTGACCTGCA .	AGGCCAGTGA GAATGTGGTT ACTTATGTTT CCTGGTATCA ACAGAAACCA	120
GAGCAGTCTC	CTAAACTGCT GATATACGGG GCATCCAACC GGTACACTGG GGTCCCCGAT	180
CGCTTCACAG	GCAGTGGATC TGCAACAGAT TTCACTCTGA CCATCAGCAG TGTGCAGGCT	240
GAAGACCTTG	CAGATTATCA CTGTGGACAG GGTTACAGCT ATCCGTACAC GTTCGGAGGG	300
GGGACCAAGC	TGGAAATAAA A	321
	MATION FOR SEQ ID NO:15: SEQUENCE CHARACTERISTICS: (A) LENGTH: 321 base pairs (B) TYPE: nucleic acid (C) STRANDEDNESS: single (D) TOPOLOGY: linear	
	MOLECULE TYPE: cDNA SEQUENCE DESCRIPTION: SEQ ID NO:15:	
TTTTATTTCC	AGCTTGGTCC CCCCTCCGAA CGTGTACGGA TAGCTGTAAC CCTGTCCACA	60
	GCAAGGTCTT CAGCCTGCAC ACTGCTGATG GTCAGAGTGA AATCTGTTGC	120
AGATCCACTG	CCTGTGAAGC GATCGGGGAC CCCAGTGTAC CGGTTGGATG CCCCGTATAT	180
CAGCAGTTTA	GGAGACTGCT CTGGTTTCTG TTGATACCAG GAAACATAAG TAACCACATT	240
CTCACTGGCC	TTGCAGGTCA AGGTGACCCT CTCTCCTACT GACATGGACA TGGATTTGGG	300
AGATTGGGTC	ATTACAATGT T	321
(2) INFOR	MATION FOR SEQ ID NO:16:	
(i)	SEQUENCE CHARACTERISTICS: (A) LENGTH: 107 amino acids (B) TYPE: amino acid (C) STRANDEDNESS: (D) TOPOLOGY: linear	į.
(ii) 1	MOLECULE TYPE: protein	

(xi) SEQUENCE DESCRIPTION: SEQ ID NO:16:

Asn 1	Ile	Val	Met	Thr 5	Gln	Ser	Pro	Lys	Ser 10	Met	Ser	Met	Ser	Val 15	Gly
Glu	Arg	Val	Thr 20	Leu	Thr	Cys	Lys	Ala 25	Ser	Glu	Asn	Val	Val 30	Thr	Туг
Val	Ser	Trp 35	Tyr	Gln	Gln	Lys	Pro 40	Glu	Gln	Ser	Pro	Lys 45	Leu	Leu	Ile
Tyr	Gly 50	Ala	Ser	Asn	Arg	Tyr 55	Thr	Gly	Val	Pro	Asp 60	Arg	Phe	Thr	Gly
Ser 65	Gly	Ser	Ala	Thr	Asp 70	Phe	Thr	Leu	Thr	Ile 75	Ser	Ser	Val	Gln	Ala 80
Glu	Asp	Leu	Ala	Asp 85	Tyr	His	Cys	Gly	Gln 90	Gly	Tyr	Ser	Tyr	Pro 95	Туг
Thr	Phe	Gly	Gly 100	Gly	Thr	Lys	Leu	Glu 105	Ile	Lys					

(2) INFORMATION FOR SEQ ID NO:17:

- (i) SEQUENCE CHARACTERISTICS:
 - (A) LENGTH: 321 base pairs
 - (B) TYPE: nucleic acid
 - (C) STRANDEDNESS: single
 - (D) TOPOLOGY: linear
- (ii) MOLECULE TYPE: cDNA
- (xi) SEQUENCE DESCRIPTION: SEQ ID NO:17:

GACATTGTGA	TGACCCAGTC	TCACAAATTC	ATGTCCACAT	CAGTAGGAGA	CAGGGTCAGC	60
ATCATCTGTA	AGGCCAGTCA	AGATGTGGGT	ACTGCTGTAG	ACTGGTATCA	ACAGAAACCA	120
GGACAATCTC	CTAAACTACT	GATTTATTGG	GCATCCACTC	GGCACACTGG	AGTCCCTGAT	180
CGCTTCACAG	GCAGTGGATC	TGGGACAGAC	TTCACTCTCA	CCATTACTAA	TGTTCAGTCT	240
GAAGACTTGG	CAGATTATTT	CTGTCAGCAA	TATAACAGCT	ATCCTCTCAC	GTTCGGTGCT	300
GGGACCATGC	TGGACCTGAA	A				321

(2) INFORMATION FOR SEQ ID NO:18:

- (i) SEQUENCE CHARACTERISTICS:
 - (A) LENGTH: 321 base pairs

 - (B) TYPE: nucleic acid(C) STRANDEDNESS: single
 - (D) TOPOLOGY: linear
- (ii) MOLECULE TYPE: cDNA
- (xi) SEQUENCE DESCRIPTION: SEQ ID NO:18:

TTTCAGGTCC	AGCATGGTCC	CAGCACCGAA	CGTGAGAGGA	TAGCTGTTAT	ATTGCTGACA	60
GAAATAATCT	GCCAAGTCTT	CAGACTGAAC	ATTAGTAATG	GTGAGAGTGA	AGTCTGTCCC	120
AGATCCACTG	CCTGTGAAGC	GATCAGGGAC	TCCAGTGTGC	CGAGTGGATG	CCCAATAAAT	180
CAGTAGTTTA	GGAGATTGTC	CTGGTTTCTG	TTGATACCAG	TCTACAGCAG	TACCCACATC	240
TTGACTGGCC	TTACAGATGA	TGCTGACCCT	GTCTCCTACT	GATGTGGACA	TGAATTTGTG	300
AGACTGGGTC	ATCACAATGT	С				321

(2) INFORMATION FOR SEQ ID NO:19:

- (i) SEQUENCE CHARACTERISTICS:
 - (A) LENGTH: 107 amino acids
 - (B) TYPE: amino acid
 - (C) STRANDEDNESS:
 - (D) TOPOLOGY: linear
- (ii) MOLECULE TYPE: protein

(xi) SEQUENCE DESCRIPTION: SEQ ID NO:19:

Asp Ile Val Met Thr Gln Ser His Lys Phe Met Ser Thr Ser Val Gly
1 10 15

Asp Arg Val Ser Ile Ile Cys Lys Ala Ser Gln Asp Val Gly Thr Ala
20 25 30

Val Asp Trp Tyr Gln Gln Lys Pro Gly Gln Ser Pro Lys Leu Leu Ile 35 40 45

Tyr Trp Ala Ser Thr Arg His Thr Gly Val Pro Asp Arg Phe Thr Gly 50 55 60

Ser Gly Ser Gly Thr Asp Phe Thr Leu Thr Ile Thr Asn Val Gln Ser 65 70 75 80

Glu Asp Leu Ala Asp Tyr Phe Cys Gln Gln Tyr Asn Ser Tyr Pro Leu 85 90 95

Thr Phe Gly Ala Gly Thr Met Leu Asp Leu Lys
100 105

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WHAT IS CLAIMED:

A method of ablating or killing cancerous cells comprising:

providing a biological agent which, when contacted with an extracellular domain of prostate specific membrane antigen, binds to the extracellular domain of prostate specific membrane antigen and

contacting vascular endothelial cells proximate to the cancerous cells with the biological agent under conditions effective to permit both binding of the biological agent to the vascular endothelial cells proximate to the cancerous cells and ablating or killing of the cancerous cells.

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- 2. A method according to claim 1, wherein the biological agent kills or ablates the vascular endothelial cells proximate to the cancerous cells, thereby killing or ablating the cancerous cells by reducing blood flow thereto.
- 3. A method according to claim 1, wherein the cancerous cells are renal cancerous cells, urothelial cancerous cells, colon cancerous cells, rectal cancerous cells, lung cancerous cells, breast cancerous cells, or cancerous cells of metastatic adenocarcinoma to the liver.
- 4. A method according to claim 1, wherein the biological agent is an antibody or binding portion 30 thereof, probe, or ligand.
- A method according to claim 1, wherein the biological agent, when contacted with an extracellular domain of prostate specific membrane antigen, is 35 internalized with the prostate specific membrane antigen.

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6. A method according to claim 1, wherein said contacting is carried out in a living mammal and comprises:

administering the biological agent to the mammal under conditions effective to permit both binding of the biological agent to vascular endothelial cells proximate to the cancerous cells and killing of the cancerous cells.

7. A method according to claim 6, wherein said administering is carried out orally, parenterally, subcutaneously, intravenously, intramuscularly, intraperitoneally, by intranasal instillation, by intracavitary or intravesical instillation, intraocularly, intraarterially, intralesionally, or by

application to mucous membranes.

- 8. A method according to claim 4, wherein an antibody is used in carrying out said method, the antibody being selected from the group consisting of a monoclonal antibody and a polyclonal antibody.
- A method according to claim 8, wherein the antibody is selected from the group consisting of an E99,
 a J415, a J533, and a J591 monoclonal antibody.
 - 10. A method according to claim 8, wherein the antibody is a monoclonal antibody produced by a hybridoma cell line having an ATCC Accession Number selected from the group consisting of HB-12101, HB-12109, HB-12127, and HB-12126.
- 11. A method according to claim 4, wherein a binding portion of an antibody is used in carrying out said method, the binding portion being selected from the group consisting of an Fab fragment, an F(ab')₂ fragment, and an Fv fragment.

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- A method according to claim 4, wherein the probe or ligand is used in carrying out said method.
- 13. A method according to claim 1, wherein the 5 biological agent is bound to a substance effective to kill or ablate the cancerous cells upon binding of the biological agent to vascular endothelial cells proximate to the cancerous cells.
- A method according to claim 13, wherein 10 the substance effective to kill or ablate the cancerous cells is a cytotoxic drug.
- A method according to claim 14, wherein the cytotoxic drug is selected from the group consisting 15 of therapeutic drug, a compound emitting radiation, molecules of plant, fungal, or bacterial origin, biological proteins, and mixtures thereof.
- A method according to claim 4, wherein the 20 antibody is effective to initiate an endogenous host immune function.
- A method according to claim 16, wherein the endogenous host immune function is complement-25 mediated cellular cytoxicity.
- A method according to claim 16, wherein the endogenous host immune function is antibody-dependent 30 cellular cytoxicity.
 - A method according to claim 1, wherein the biological agent is in a composition further comprising a physiologically acceptable carrier, excipient, or stabilizer.

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20. A method according to claim 1, wherein the biological agent is in a composition further comprising a pharmaceutically acceptable carrier, excipient, or stabilizer.

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21. A method of detecting cancerous tissue in a biological sample comprising:

providing an biological agent which, when contacted with an extracellular domain of prostate specific membrane antigen, binds to the extracellular domain of prostate specific membrane antigen, wherein the biological agent is bound to a label effective to permit detection of vascular endothelial cells proximate to or within the cancerous tissue upon binding of the biological agent to the vascular endothelial cells proximate to or within the cancerous tissue;

contacting the biological sample with the biological agent having a label under conditions effective to permit binding of the biological agent to the vascular endothelial cells proximate to or within the cancerous tissue in the biological sample; and

detecting a presence of any cancerous tissue in the biological sample by detecting the label.

- 22. A method according to claim 21, wherein the cancerous tissue is renal cancerous tissue, urothelial cancerous tissue, colon cancerous tissue, rectal cancerous tissue, lung cancerous tissue, breast cancerous tissue, or cancerous tissue of metastatic adenocarcinoma to the liver.
 - 23. A method according to claim 21, wherein the biological agent is an antibody or binding portion thereof, probe, or ligand.

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24. A method according to claim 21, wherein the biological agent, when contacted with an

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extracellular domain of prostate specific membrane is internalized with the prostate specific membrane antigen.

5 A method according to claim 21, wherein said contacting is carried out in a living mammal and comprises:

administering the biological agent to the mammal under conditions effective to permit binding of the biological agent to the vascular endothelial cells proximate to or within the cancerous tissue in the biological sample.

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- A method according to claim 25, wherein the label is a short-range radiation emitter. 15
- A method according to claim 25, wherein said administering is carried out orally, parenterally, subcutaneously, intravenously, intramuscularly, intraperitoneally, by intraversal instillation, by 20 intracavitary or intravesical instillation, intraocularly, intraarterially, intralesionally, or by application to mucous membranes.
- 25 A method according to claim 23, wherein an antibody is used in carrying out said method, said antibody being selected from the group consisting of a monoclonal antibody and a polyclonal antibody.
- A method according to claim 28, wherein 30 29. the antibody is selected from the group consisting of an E99, a J415, a J533, and a J591 monoclonal antibody.
- 30. A method according to claim 28, wherein the antibody is a monoclonal antibody produced by a 35 hybridoma cell line having an ATCC Accession Number

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selected from the group consisting of HB-12101, HB-12109, HB-12127, and HB-12126.

- 31. A method according to claim 23, wherein a binding portion of an antibody is used in carrying out said method, the binding portion being selected from the group consisting of an Fab fragment, an F(ab')₂ fragment, and an Fv fragment.
- 32. A method according to claim 23, wherein a probe or ligand is used in carrying out said method.
- 33. A method according to claim 21, wherein the label is selected from the group consisting of a fluorescent label, a radioactive label, a nuclear magnetic resonance active label, a luminescent label, and a chromophore label.
- 34. A method according to claim 21, wherein the biological agent is in a composition further comprising a physiologically acceptable carrier, excipient, or stabilizer.
- 35. A method according to claim 21, wherein the biological agent is in a composition further comprising a pharmaceutically acceptable carrier, excipient, or stabilizer.
- 36. A method according to claim 21, wherein said contacting is carried out in a sample of serum or urine.
 - 37. A method according to claim 21, wherein said contacting is carried out in a tissue biopsy sample.

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38. A method of ablating or killing normal, benign hyperplastic, and cancerous prostate epithelial cells comprising:

providing a biological agent which binds to an extracellular domain of prostate specific membrane antigen and

contacting said cells with the biological agent under conditions effective to permit both binding of the biological agent to the extracellular domain of the prostate specific membrane antigen and ablating or killing of said cells.

- 39. A method according to claim 38, wherein the biological agent is an antibody or binding portion thereof, probe, or ligand.
 - 40. A method according to claim 38, wherein the biological agent is internalized with the prostate specific membrane antigen.

41. A method according to claim 38, wherein said contacting is carried out in a living mammal and comprises:

administering the biological agent to the
25 mammal under conditions effective to permit both binding
of the biological agent to the extracellular domain of
the prostate specific membrane antigen and killing of
said cells.

- 42. A method according to claim 41, wherein the biological agent is internalized with the prostate specific membrane antigen.
- 43. A method according to claim 41, wherein said administering is carried out orally, parenterally, subcutaneously, intravenously, intramuscularly, intraperitoneally, by intranasal instillation, by

intracavitory or intravesical instillation, intraocularly, intraarterially, intralesionally, or by application to mucous membranes.

- 44. A method according to claim 39, wherein an antibody is used in carrying out said method, the antibody being selected from the group consisting of a monoclonal antibody and a polyclonal antibody.
- 10 45. A method according to claim 44, wherein the antibody is selected from the group consisting of an E99, a J415, a J533, and a J591 monoclonal antibody.
- 46. A method according to claim 44, wherein
 the antibody is a monoclonal antibody produced by a
 hybridoma cell line having an ATCC Accession Number
 selected from the group consisting of HB-12101, HB-12109,
 HB-12127, and HB-12126.
- 47. A method according to claim 39, wherein a binding portion of an antibody is used in carrying out said method, the binding portion being selected from the group consisting of an Fab fragment, an F(ab')₂ fragment, and an Fv fragment.
 - 48. A method according to claim 39, wherein the probe or ligand is used in carrying out said method.
- 49. A method according to claim 38, wherein
 the biological agent is bound to a substance effective to
 kill or ablate said cells upon binding of the biological
 agent to the extracellular domain of the prostate
 specific membrane antigen of said cells.
- 50. A method according to claim 49, wherein the substance effective to kill said cells is a cytotoxic drug.

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- 51. A method according to claim 50, wherein the cytotoxic drug is selected from the group consisting of therapeutic drug, a compound emitting radiation, molecules of plant, fungal, or bacterial origin, biological proteins, and mixtures thereof.
- 52. A method according to claim 39, wherein the antibody is effective to initiate an endogenous host 10 immune function.
 - 53. A method according to claim 52, wherein the endogenous host immune function is complement-mediated cellular cytoxicity.

54. A method according to claim 52, wherein the endogenous host immune function is antibody-dependent cellular cytoxicity.

- 55. A method according to claim 38, wherein the biological agent is in a composition further comprising a physiologically acceptable carrier, excipient, or stabilizer.
- 56. A method according to claim 38, wherein the biological agent is in a composition further comprising a pharmaceutically acceptable carrier, excipient, or stabilizer.
- 30 57. A method according to claim 38 further comprising:

providing a second biological agent which binds to the extracellular domain of prostate specific membrane antigen and

ontacting said cells with the second biological agent under conditions effective to permit binding of the second biological agent to the

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extracellular domain of the prostate specific membrane antigen.

- 58. A method according to claim 57, wherein the biological agent and the second biological agent bind to non-competing binding sites on the extracellular domain of the prostate specific membrane antigen.
- 59. A method according to claim 57, wherein the biological agent is a J415 monoclonal antibody and the second biological agent is an E99, a J533, or a J591 monoclonal antibody.
- 60. A method according to claim 57, wherein
 the biological agent is bound to a substance effective to kill or ablate said cells upon binding of the biological agent to the extracellular domain of the prostate specific membrane antigen of said cells and upon activation by an activator and wherein the second
 biological agent is bound to the activator.
 - 61. A method of detecting normal, benign hyperplastic, and cancerous prostate epithelial cells or a portion thereof in a biological sample comprising:
- providing an biological agent which binds to an extracellular domain of prostate specific membrane antigen, wherein the biological agent is bound to a label effective to permit detection of said cells or a portion thereof upon binding of the biological agent to said cells or a portion thereof;
 - contacting the biological sample with the biological agent having a label under conditions effective to permit binding of the biological agent to the extracellular domain of the prostate specific membrane antigen of any of said cells or a portion thereof in the biological sample; and

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detecting a presence of any of said cells or a portion thereof in the biological sample by detecting the label.

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- 5 62. A method according to claim 61, wherein the biological agent is an antibody or binding portion thereof, probe, or ligand.
- 63. A method according to claim 61, wherein the biological agent is internalized with the prostate specific membrane antigen.
- 64. A method according to claim 61, wherein said contacting is carried out in a living mammal and comprises:

administering the biological agent to the mammal under conditions effective to permit binding of the biological agent to the extracellular domain of the prostate specific membrane antigen of any of said cells or a portion thereof in the biological sample.

- 65. A method according to claim 64, wherein the label is a short-range radiation emitter.
- 25 66. A method according to claim 64, wherein said detecting is carried out rectally.
 - 67. A method according to claim 64, wherein the biological sample is the mammal's prostatic fossa.
 - 68. A method according to claim 64, wherein said detecting is carried out after a prostatectomy.
- 69. A method according to claim 64, wherein the biological agent is internalized with the prostate specific membrane antigen.

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- 70. A method according to claim 64, wherein said administering is carried out orally, parenterally, subcutaneously, intravenously, intramuscularly, intraperitoneally, by intraversal instillation, by intracavitory or intravesical instillation, intraocularly, intraarterially, intralesionally, or by application to mucous membranes.
- 71. A method according to claim 62, wherein an antibody is used in carrying out said method, said antibody being selected from the group consisting of a monoclonal antibody and a polyclonal antibody.
- 72. A method according to claim 71, wherein the antibody is selected from the group consisting of an E99, a J415, a J533, and a J591 monoclonal antibody.
- 73. A method according to claim 71, wherein the antibody is a monoclonal antibody produced by a 20 hybridoma cell line having an ATCC Accession Number selected from the group consisting of HB-12101, HB-12109, HB-12127, and HB-12126.
- 74. A method according to claim 62, wherein a 25 binding portion of an antibody is used in carrying out said method, the binding portion being selected from the group consisting of an Fab fragment, an F(ab')₂ fragment, and an Fv fragment.
- 75. A method according to claim 62, wherein a probe or ligand is used in carrying out said method.
- 76. A method according to claim 61, wherein the label is selected from the group consisting of a fluorescent label, a radioactive label, a nuclear magnetic resonance active label, a luminescent label, and a chromophore label.

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77. A method according to claim 61, wherein the biological agent is in a composition further comprising a physiologically acceptable carrier, excipient, or stabilizer.

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78. A method according to claim 61, wherein the biological agent is in a composition further comprising a pharmaceutically acceptable carrier, excipient, or stabilizer.

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- 79. A method according to claim 61, wherein said contacting is carried out in a sample of serum or urine.
- 15 80. An isolated biological agent which binds to an extracellular domain of prostate specific membrane antigen.
- 81. An isolated biological agent according to claim 80, wherein said isolated biological agent is an isolated antibody or binding portion thereof, probe, or ligand.
- 82. An isolated biological agent according to claim 80, wherein the biological agent is internalized with the prostate specific membrane antigen.
- 83. An isolated biological agent according to claim 81, wherein the isolated biological agent is an antibody selected from the group consisting of a monoclonal antibody and a polyclonal antibody.
- 84. An isolated biological agent according to claim 83, wherein the antibody is selected from the group consisting of an E99, a J415, a J533, and a J591 monoclonal antibody.

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An isolated biological agent according to claim 83, wherein the antibody is a monoclonal antibody produced by a hybridoma having an ATCC Accession Number selected from the group consisting of HB-12101, HB-12109, HB-12127, and HB-12126.

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- An isolated biological agent according to claim 81, wherein the isolated biological agent is a binding portion of an antibody selected from the group consisting of a Fab fragment, a F(ab'), fragment, and a Fv fragment.
- An isolated biological agent according to claim 81, wherein the isolated biological agent is a probe or ligand. 15
 - An isolated biological agent according to claim 80, wherein the biological agent is bound to a cytotoxic drug.

An isolated biological agent according to claim 88, wherein the cytotoxic drug is selected from the group consisting of a therapeutic drug, a compound emitting radiation, molecules of plant, fungal, or bacterial origin, biological proteins, and mixtures thereof.

A composition comprising:

a biological agent according to claim 88 and a physiologically acceptable carrier, excipient, or stabilizer mixed with the biological agent.

A composition comprising:

a biological agent according to claim 88 and a pharmaceutically acceptable carrier, excipient, or stabilizer mixed with the biological agent. WO 98/03873 PCT/US97/12035 -

- 76 -

- 92. An isolated biological agent according to claim 80, wherein said biological agent is bound to a label.
- 93. An isolated biological agent according to claim 92, wherein the label is selected from the group consisting of a fluorescent label, a biologically-active enzyme label, a radioactive label, a nuclear magnetic resonance active label, a luminescent label, and a chromophore label.
 - 94. A composition comprising:
 - a biological agent according to claim 92 and a physiologically acceptable carrier,
- 15 excipient, or stabilizer mixed with the biological agent.
 - 95. A composition comprising:

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- a biological agent according to claim 92 and a pharmaceutically acceptable carrier, excipient, or stabilizer mixed with the biological agent.
- 96. A kit for detecting cancer comprising:
 a biological agent according to claim 92 and
 25 means to detect the label.
 - 97. A kit according to claim 96, wherein the label is selected from the group consisting of a fluorescent label, a biologically-active enzyme label, a radioactive label, a nuclear magnetic resonance active label, a luminescent label, and a chromophore label.
- 98. A kit according to claim 96, wherein said biological agent is an E99, a J415, a J533, or a J591 monoclonal antibody.

99. A kit according to claim 96, wherein the biological agent is in a composition further comprising a physiologically acceptable carrier, excipient, or stabilizer.

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100. A kit according to claim 96, wherein the biological agent is in a composition further comprising a pharmaceutically acceptable carrier, excipient, or stabilizer.

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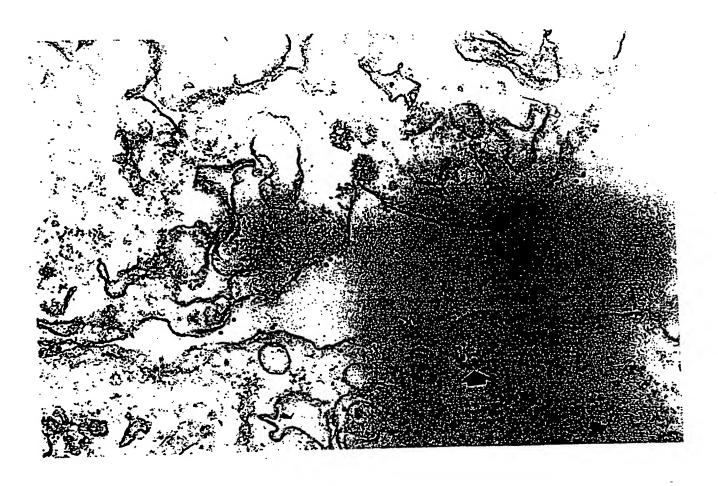
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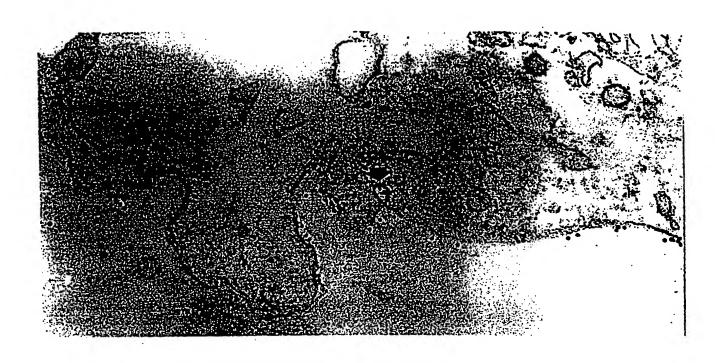
- 101. A kit according to claim 96, wherein the cancer is selected from the group consisting of prostate cancer, renal cancer, urothelial cancer, colon cancer, lung cancer, breast cancer, and metastatic adenocarcinoma to the liver
- 102. A hybridoma cell line that produces a monoclonal antibody which binds to an extracellular domain of prostate specific membrane antigen.

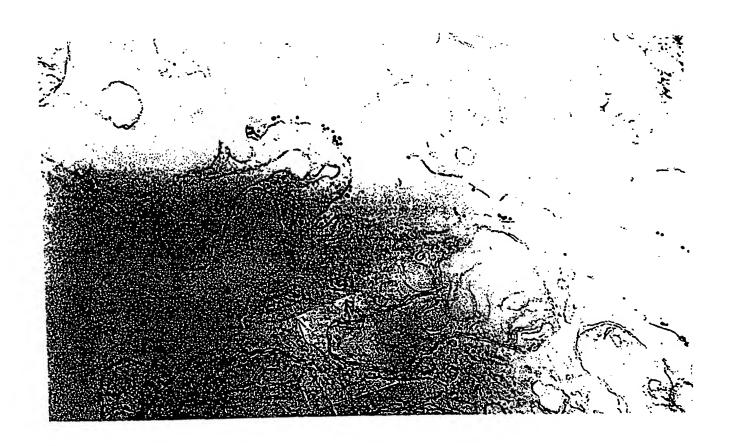
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- 103. A hybridoma cell according to claim 102, wherein the antibody is internalized with the prostate specific membrane antigen.
- 104. A hybridoma cell line according to claim 102, wherein the monoclonal antibody is an E99, a J415, a J533, or a J591 monoclonal antibody.
- 105. A hybridoma cell line according to claim
 30 102 wherein the hybridoma cell line has an ATCC Accession
 Number selected from the group consisting of HB-12101,
 HB-12109, HB-12127, and HB-12126.

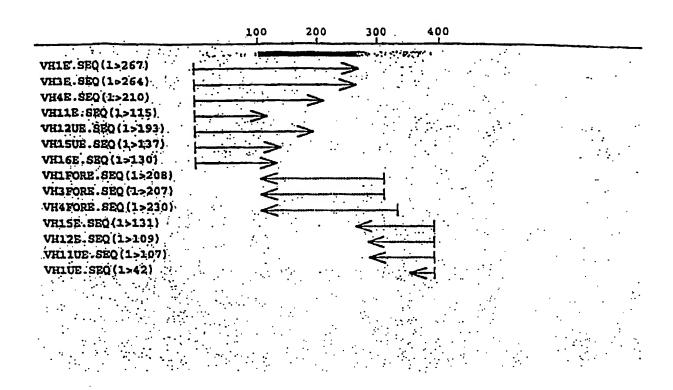






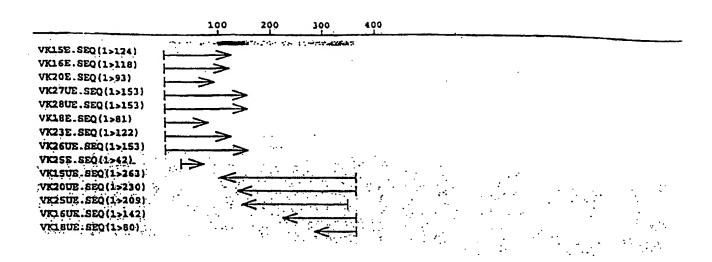






	Enzymes: All 74 enzymes (No Filter) Settings: Linear, Certain Sites Only, Standard Genetic Code
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SEQ. ID. NO. 2	AGAGGACAGTCCTTGACGTCCACAGGAGAGACTCCAGGTCGACGTTGTCAGACCTGGACTTGACCACTTC
SEQ. ID. NO. 3	SPYRNCRCPL.GPAATVWT.TGE
SEQ. ID. NO. 4 SEQ. ID. NO. 5	LL S G T A G Y L S E Y O L O Q S G P E L Y K L S C O E L O Y S S L R S S C N S L D L N W . S
DDQ. 1D. 10. 7	
	High I Dreatil Bor I Bor I
SEQ. ID. NO. 1	CCTGGGACTTCAGTGAGGATATCCTGCAAGACTTCTGGATACACATTCACTGAATATACCATACACTGGG
SEQ. ID. NO. 2	GGACECTGAAGTCACTCCTATAGGACGTTCTGAAGACCTATGTGTAAGTGACTTATATGGTATGTGACCC
SEQ. ID. NO. 3	AWDESEDILOOFWIHIH. INVINITED POTSYRISCKTSGYTFTEYTIHW
SEQ. ID. NO. 4 SEQ. ID. NO. 5	LELO CARLLOTHS L'NEPYTTE
	Hph I
	Noo I Kpn I
SEQ. ID. NO. 1	TGAAGCAGAGCCATGGAAAGAGCCTTGAGTGGATTGGAAACATCCATC
SEQ. ID. NO. 2	ACTTCGTCTCGGTACCTTTCTCGGAACTCACCTTACCTT
SEQ. ID. NO. 3 SEQ. ID. NO. 4	EAEPWKEP. V D W K H O S , O W W Y. H L V K O S H G K S L E W I G N I N P N N G G T T Y
SEQ. ID. NO. 5	. S R A H E R A L S G L E T S I L T H V V P P
•	
•	Alul
	Taq I Hae III Acc I Bsr I Rsa I Sac I
SEQ. ID. NO. 1	Taq I Hae III Acc I Bsr I Rsa I Sac I CAATCAGAAGTTCGAGGACAAGGCCACATTGACTGTAGACAAGTCCTCCAGTACAGCGTACATGGAGCTC 280
	Taq I Hae III Acc I Bsr I Rsa I Sac I CAATCAGAAGTTCGAGGACAAGGCCACATTGACTGTAGACAAGTCCTCCAGTACAGCGTACATGGAGCTC 280
SEQ. ID. NO. 1 SEQ. ID. NO. 2 SEQ. ID. NO. 3	Taq I Hae III ACC I BST RSa I Sac I CAATCAGAAGTTCGAGGACAAGGCCACATTGACTGTAGACAAGTCCTCCAGTACAGCGTACATGGAGCTC GTTAGTCTTCAAGCTCCTGTTCCGGTGTAACTGACATCTGTTCAGGAGGTCATGTCGGATGTACCTCGAG O S E- V R G O G H I O C R O V L O Y S L H G A
SEQ. ID. NO. 1 SEQ. ID. NO. 2 SEQ. ID. NO. 3 SEQ. ID. NO. 4	TaqI Hae III ACCI BSTIRSAI BAN II SACI CAATCAGAAGTTCGAGGACAAGGCCACATTGACTGTAGACAAGTCCTCCAGTACAGCGTACATGGAGCTC GTTAGTCTTCAAGCTCCTGTTCCGGTGTAACTGACATCTGTTCAGGAGGTCATGTCGGATGTACCTCGAG O. S. E. V. R. G. O. G. H. I. O. C. R. O. V. L. O. Y. S. L. H. G. A. N. O. K. F. E. D. K. A. T. L. T. V. D. K. S. S. S. T. A. Y. H. E. L. T. R. S. R. T. R. P. H. L. T. S. P. P. V. O. P. T. W. S. S.
SEQ. ID. NO. 1 SEQ. ID. NO. 2 SEQ. ID. NO. 3	TaqI Hae III ACCI BSTIRSAI BAN II SACI CAATCAGAAGTTCGAGGACAAGGCCACATTGACTGTAGACAAGTCCTCCAGTACAGCGTACATGGAGCTC GTTAGTCTTCAAGCTCCTGTTCCGGTGTAACTGACATCTGTTCAGGAGGTCATGTGGATGTACCTCGAG O. S. E. Y. R. G. O. G. H. I. O. C. R. O. Y. L. O. Y. S. L. H. G. A. N. O. K. F. E. D. K. A. T. L. T. V. D. K. S. S. S. T. A. Y. M. E. L. T. R. S. S. R. T. R. P. H. L. T. S. P. P. V. O. P. T. W. S. S.
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SEQ. ID. NO. 1 SEQ. ID. NO. 2 SEQ. ID. NO. 3 SEQ. ID. NO. 4	Taq I Hae III Acc I Bsr I Rsa I Sac I CAATCAGAAGTTCGAGGACAAGGCCACATTGACTGTAGACAAGTCCTCCAGTACAGCGTACATGGAGCTC GTTAGTCTTCAAGCTCCTGTTCCGGTGTAACTGACATCTGTTCAGGAGGTCATGTCGGATGTACCTCGAG O. S. E. V. R. G. O. G. H. I. D. C. R. O. Y. L. O. Y. S. L. H. G. A. N. D. K. F. E. D. K. A. T. L. T. V. D. K. S. S. S. T. A. Y. H. E. L. T. S. P. P. V. O. P. T. W. S. S. T. I. R. S. S. R. T. R. P. H. L. T. S. P. P. V. O. P. T. W. S. S. Dde I. Hinf I. Pst I. Pvu II. Bsr I. Hae III. CGCAGCCTAACATCTGAGGATTCTGCAGTCTATTATTGTGCAGCTGGTTGGAACTTTGACTAGTGGGGCC. 350
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SEQ. ID. NO. 1 SEQ. ID. NO. 2 SEQ. ID. NO. 4 SEQ. ID. NO. 5 SEQ. ID. NO. 1 SEQ. ID. NO. 2 SEQ. ID. NO. 2 SEQ. ID. NO. 2 SEQ. ID. NO. 3	Taq I Hae III ACC I BST RSa I Sac
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Lipman-Pearson Prote Ktuple: 2; Gap Penal Seq1(1>115) J591VH.PRO	ein Alignment ty: 4; Gap Length Seq2(1>125) MUVHIIA PRO	Penalty: 12. Similarity Index	Gap Number	Gap Length	Consensus Length
				10	
(1>115)	(1>125)	75.6		10	125
₹10	√ 20	£30	€ 40 €	, 50	•
EVOLOOSGPELVKPGT			SHGKSLEWIGN	I I NPNNGG1	T
EVOLOOSGPELYKPG:	SY: ISCK: SGYTF	T:Y:::WVKQ	S.GKSLEWIG:	INP.NGG1	
EVOLOOSGPELVKPG/	SVKISCKASGYTF	TDYYMNNWVKO	SPGKSLEWIGE	I NPGNGG1	rs -
4 10	420	4 30 4	40		^ 60
<i>-</i> 60 <i>-</i> ₹70	√80	√ 90	₹1	1:00	. ∲ 110
YNOKFEDKATLTVDK	SSTAYMELRSLTS	EDSAVYYCAAG	W	VFDYWGQG	所。"
YNOKF KATLTVOK	SSSTAYM:L.SLTS	EDSAVYYCA G		.FDYWGQG	r T
YNOKFKGKATLTVDK	SSSTAYMOLSSLTS	EDSAVYYCARG	YYSSSYMAYY	AFDYWGOG	rit .
* 70	* 80	49 0	100	110	~ ~ 120
LTVSS					• •
: T.VSS		•			47
VTVSS:	*** * * * * **		• •	• • •	•



	Enzymes: All 74 enzymes (No Filter) Settings: Linear, Certain Siles Only, Standard Genetic Code
-	Alu I Hph I
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SEQ. ID. NO. 11 SEQ. ID. NO. 12 SEQ. ID. NO. 13	LYGADGNIVHTOSPÄSHSHSVGE Y-HELHGTLPNLPNPCPCO.ER IIWS.WEHCNOPISOIHVHVSRRE
	Hae III Ber l
SEQ. ID. NO. 9	GGGTCACCTTGACCTGCAAGGCCAGTGAGAATGTGGTTAGTTA
SEQ. ID. NO. 10	CCCAGTGGAACTGGACGTTCCGGTCACTCTTACACCAATGAATACAAAGGACCATAGTTGTCTTTGGTCT
SEQ. ID. NO. 11 SEQ. ID. NO. 12 SEQ. ID. NO. 13	R V T L T C K A S E N V V T Y V S W Y Q Q K P E G S P P A R P V R H V L L H F P G I N R N Q G H L D L Q G Q L E, C G Y L C F L V S T E T R
·	Ava II Dpn I Hpa II Bsr I Bsa0 I Rsa1 Sau96 I Pvu I
SEQ. ID. NO. 9	GCAGTCTCCTAAACTGCTGATATACGGGGCATCCAACCGGFACACTGGGGTCCCCGATCGCTTCACAGGC
SEQ. ID. NO. 10	CGTCAGAGGATTTGACGACTATATGCCCCGTAGGTTGGCCATGTGACCCCAGGGGGCTAGCGAAGTGTCCG
SEQ. ID. NO. 11 SEQ. ID. NO. 12 SEQ. ID. NO. 13	OSPKLLIYG:ASHRYTGVPDRFTG SSLLNG.YTGHP-TGTLGSPIASOA AVS.TADIRGIOPVHWGPRSLHR
SEQ. ID. NO. 9	MboT Opn 1 AGTGGATCTGCAACAGATTTCACTCTGACCATCAGCAGTGTGCAGGCTGAAGACCTTGCAGATTATCACT 280
SEQ. ID. NO. 10	TCACCTAGACGTTGTCTAAAGTGAGACTGGTAGTCGTCACACGTCCGACTTCTGGAACGTCTAATAGTGA
SEQ. ID. NO. 11 SEQ. ID. NO. 12 SEQ. ID. NO. 13	
	Alu I Rsa I Sau96 I Alu I
SEQ. ID. NO. 9 SEQ. ID. NO. 10	GTGGACAGGGTTACAGCTATCCGTACACGTTCGGAGGGGGGGACCAAGCTGGAAATAAAACGGGCTGATGC
SEQ. ID. NO. 11 SEQ. ID. NO. 12 SEQ. ID. NO. 13	V D R V T A : R I R S E G O F S W R . N G L . A.
SEQ. ID. NO. 9 SEQ. ID. NO. 10	TGCACCAACTGTA ACGTGGTTGACAT 363.
SEQ. ID. NO. 11 SEQ. ID. NO. 12 SEQ. ID. NO. 13	CTNC

Lipman-Pearson Prote Ktuple: 2; Gap Penalt Seq1(1>107) J591VK.PRO	in Alignment y: 4; Gap Length Seq2(1>111) MUVKV.PRO	Penalty: 12 Similarity Index	Gap Number	Gap Length	Consensus Length	
(1>107)	(1>109)	60.4	2	2	109	
F10 NIVMTOSPKSMSMSVGI : I MTOSP.S:S S:G DIOMTOSPSSLSASLGI -10 -60 -70 ORFJGSGSATOFTLT I RE:GSGS:TD::LTI SRFSGSGSGTDYSLTI	DRVTITCRASOOD \$20 \$80 SSVOAEDLADYHO	IVVTYVSWYOOK : Y::WYOOK ISNYLNWYOOK 30 490 GOGYSY-PYTE	PGGSPKLLI 40 •100 GGGTKLEIK GGGTKLEIK	YYASRLHSGY ^ 50	, L	



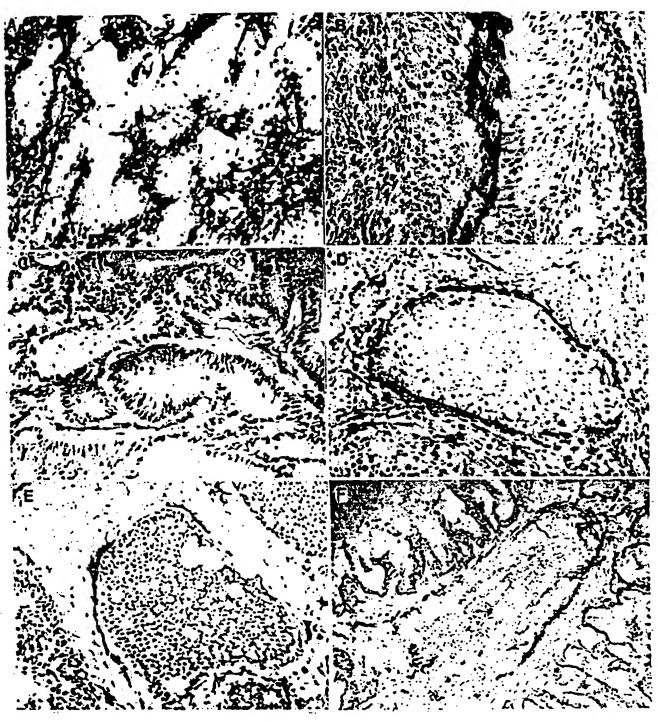


FIGURE 12

International application No. PCT/US97/12035

A. CLAS	SSIFICATION OF SUBJECT MATTER					
, , ,	GOIN 33/574, 33/53, 33/569, 33/48 435/7.2, 7.23; 436/63, 64					
	o International Patent Classification (IPC) or to both	national classification and IPC				
B. FIEL	DS SEARCHED					
Minimum de	ocumentation searched (classification system followed	by classification symbols)				
	435/7.2, 7.23; 436/63, 64					
Documentat	ion searched other than minimum documentation to the	extent that such documents are included	in the fields searched			
Electronic d	ata base consulted during the international search (na , APS	me of data base and, where practicable,	search terms used)			
C. DOC	UMENTS CONSIDERED TO BE RELEVANT					
Category*	Citation of document, with indication, where ap	propriate, of the relevant passages	Relevant to claim No.			
Y	WRIGHT, G. L. Expression of Antigen in Normal, Benign, and I Urologic Oncology. 1995. Vol. 1. No page 18.	Malignant Prostate Tissues,	1-105			
Y	MURPHY, G.P. Measurement of Antigen in the Serum with a New A. 1996. Vol. 28. No. 4. pages 266-271,	ntibody: The Prostate. April	1-105			
Y	ISRAELI, R.S. Molecular Cloning Encoding a Prostate-specific Membrane 53. No. 2. pages 227-230, especially	Antigen, January 1993. Vol.	1-105			
X Furth	per documents are listed in the continuation of Box C	See patent family appex.				
	Special extracories of cited documents: "T" later document published after the international filling data or priority					
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special reason (as specified) "Y" decument of particular relevance; the claimed invention cannot be considered to involve an inventive step when the document is combined with one or more other such document, such combination						
means being obvious to a person skilled in the art						
the	"?" document published prior to the international filing date but later than "&" document member of the same patent family the priority date elaimed					
	Date of the actual completion of the international search 28 SEPTEMBER 1997 Date of mailing of the international search 1 7 NOV 1997					
Commissio Box PCT	nailing address of the ISA/US ner of Patents and Trademarks	Authorized officer MAYONNE EYLER	Freise /8			
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International application No.
PCT/US97/12035

Category*	Citation of document, with indication, where appropriate, of the relevant passages	Relevant to claim No
		Total to diam in
?	ISRAELL R.S. "Expression of the Prostate-specific Membrane Antigen" Cancer Research. April 1994. Vol. 54. No. 7. pages 1807-1811, especially page 1807.	1-105
	US 5,489,525 A (PASTAN) 06 FEBUARY 1996, col. 2, lines 21-51.	1-105
·		
		·

International application No.
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Box I Observations where certain claims were found unsearchable (Continuation of item 1 of first sheet)
This international report has not been established in respect of certain claims under Article 17(2)(a) for the following reasons:
1. Claims Nos.: because they relate to subject matter not required to be searched by this Authority, namely:
2. Claims Nos.: because they relate to parts of the international application that do not comply with the prescribed requirements to such an extent that no meaningful international search can be carried out, specifically:
3. Claims Nos.: because they are dependent claims and are not drafted in accordance with the second and third sentences of Rule 6.4(a).
Box II Observations where unity of invention is lacking (Continuation of item 2 of first sheet)
This International Searching Authority found multiple inventions in this international application, as follows:
Please See Extra Sheet.
1. X As all required additional search fees were timely paid by the applicant, this international search report covers all searchable claims.
2. As all searchable claims could be searched without effort justifying an additional fee, this Authority did not invite payment of any additional fee.
3. As only some of the required additional search fees were timely paid by the applicant, this international search report covers only those claims for which fees were paid, specifically claims Nos.:
4. No required additional search fees were timely paid by the applicant. Consequently, this international search report is restricted to the invention first mentioned in the claims; it is covered by claims Nos.:
Remark on Protest
No protest accompanied the payment of additional search fees.

International application No. PCT/US97/12035

BOX II. OBSERVATIONS WHERE UNITY OF INVENTION WAS LACKING This ISA found multiple inventions as follows:

This application contains the following inventions or groups of inventions which are not so linked as to form a single inventive concept under PCT Rule 13.1. In order for all inventions to be searched, the appropriate additional search fees must be paid.

Group I, claim(s)1-20, 38-60 and 80-105, drawn to antibodies to prostate membrane antigen and a method of using them to treat cancer.

Group II, claim(s) 21-37 and 61-79, drawn to a second method of using antibodies to detect prostate membrane antigen.

The inventions listed as Groups I and II do not relate to a single inventive concept under PCT Rule 13.1 because, under PCT Rule 13.2, they lack the same or corresponding special technical features for the following reasons: The methods of use of Groups I and II are entirely different methods with different outcomes. A method of detection does not actively treat a cancer.

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(74) Agents: GOLDMAN, Michael, L. et al.; Nixon, Hargrave, Devans & Doyle LLP, Clinton Square, P.O. Box 1051, Rochester, NY 14603 (US). (81) Designated States: AL, AM, AT, AU, AZ, BB, BG, BR, BY, CA, CH, CN, CZ, DE, DK, EE, ES, FI, GB, GE, HU, IL, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MD, MG, MK, MN, MW, MX, NO, NZ, PL, PT, RO, RU, SD, SE, SG, SI, SK, TJ, TM, TR, TT, UA, UG, UZ, VN, YU, ARIPO patent (GH, KE, LS, MW, SD, SZ, UG, ZW), Eurasian patent (AM, AZ, BY, KG, KZ, MD, RU, TJ, TM), European patent (AT, BE, CH, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE), OAPI patent (BF, BJ, CF, CG, CI, CM, GA, GN, ML, MR, NE, SN, TD, TG).

Published

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Before the expiration of the time limit for amending the claims and to be republished in the event of the receipt of amendments.

(54) Title: TREATMENT AND DIAGNOSIS OF CANCER

(57) Abstract

The present invention is directed to the use of antibodies or binding portions thereof, probes, ligands, or other biological agents which either recognize an extracellular domain of prostate specific membrane antigen or bind to and are internalized with prostate specific membrane antigen. These biological agents can be labeled and used for detection of cancerous tissues, particularly cancerous tissues proximate to or containing vascular endothelial cells, which express an extracellular domain of prostate specific membrane antigen. The labeled biological agents can also be used to detect normal, benign hyperplastic, and cancerous prostate epithelial cells or portions thereof. They also can be used alone or bound to a substance effective to ablate or kill such cells as a therapy for prostate or other cancers. Also disclosed are four hybridoma cell lines, each of which produces a monoclonal antibody recognizing extracellular domains of prostate specific membrane antigens of normal, benign hyperplastic, and cancerous prostate epithelial cells or portions thereof.

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TREATMENT AND DIAGNOSIS OF CANCER

The present application claims the benefit of U.S. Provisional Patent Application 60/022,125, filed July 18, 1996, and is a continuation-in-part of U.S. Patent Application Serial No. 08/838,682, filed April 9, 1997, which claims the benefit of U.S. Provisional Patent Application Serial No. 60/016,976, filed May 6, 1996.

FIELD OF THE INVENTION

The present invention relates to the treatment and diagnosis of cancer with biological agents.

BACKGROUND OF THE INVENTION

In spite of improved treatments for certain forms of cancer, it is still a leading cause of death in the United States. Since the chance for complete remission of cancer is, in most cases, greatly enhanced by early diagnosis, it is very desirable that physicians be able to detect cancers before a substantial tumor develops. However, the development of methods that permit rapid and accurate detection of many forms of cancers continues to challenge the medial community. One such illustrative form of cancer is prostate cancer.

Prostate cancer is the most common cancer in men with an estimated 317,000 cases in 1996 in the United States. It is the second leading cause of death among men who die from neoplasia with an estimated 40,000 deaths per year. Prompt detection and treatment is needed to limit mortality caused by prostate cancer.

Detection of Prostate Cancer

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When it metastasizes, prostatic cancer has a distinct predilection for bone and lymph nodes. Saitoh et al., "Metastatic Patterns of Prostatic Cancer.

Correlation Between Sites And Number Of Organs Involved,"

40 <u>Cancer</u>, 54:3078-3084 (1984). At the time of clinical

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diagnosis, as many as 25% of patients have bone metastasis demonstrable by radionuclide scans. Murphy, G.P., et al., "The National Survey Of Prostate Cancer In The United States By The American College Of Surgeons." J. Urol., 127:928-939 (1982). Accurate clinical evaluation of nodal involvement has proven to be difficult. Imaging techniques such as computed tomography ("CT") or magnetic resonance ("MR") imaging are unable to distinguish metastatic prostate cancer 10 involvement of lymph nodes by criterion other than size (i.e., > 1 cm). Therefore, by definition, these imaging modalities are inherently insensitive in the detection of small volume (< 1 cm) disease as well as non-specific in the detection of larger volume adenopathy. A recent 15 study assessed the accuracy of MR in patients with clinically localized prostate cancer. Rifkin et al., "Comparison Of Magnetic Resonance Imaging And Ultrasonography In Staging Early Prostate Cancer, " N. Engel. J. Med., 323:621-626 (1990). In this study, 194 20 patients underwent an MR and 185 of these patients had a lymph node dissection. 23 (13%) patients had pathologically involved lymph nodes. MR was suspicious in only 1 of these 23 cases resulting in a sensitivity of 4%. Similar results have also been noted with CT scans. 25 Gasser et al., "MRI And Ultrasonography In Staging Prostate Cancer, " N. Engl. J. Med. (Correspondence), 324(7):49-495 (1991).

The elevation of serum acid phosphatase activity in patients having metastasized prostate

30 carcinoma was first reported by Gutman et al., <u>J. Clin. Invest</u> 17:473 (1938). In cancer of the prostate, prostatic acid phosphatase is released from the cancer tissue into the blood stream with the result that the total serum acid phosphatase level can be greatly

35 increased above normal values. Numerous studies of this enzyme and its relation to prostatic cancer have been made since that time, e.g. Yam, Amer. J. Med. 56:604

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(1974). However, the measurement of serum acid phosphatase is elevated in about 65-90 percent of patients having carcinoma of the prostate with bone metastasis; in about 30 percent of patients without roentgenological evidence of bone metastasis; and in about only 5-10 percent of patients lacking clinically demonstrable metastasis.

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Prior art attempts to develop a specific test for prostatic acid phosphatase have met with only limited success, because techniques which rely on enzyme activity on a so-called "specific" substrate cannot take into account other biochemical and immunochemical differences among the many acid phosphatases which are unrelated to enzyme activity of prostate origin. In the case of isoenzymes, i.e. genetically defined enzymes having the same characteristic enzyme activity and a similar molecular structure but differing in amino acid sequences and/or content and, therefore, immunochemically distinguishable, it would appear inherently impossible to distinguish different isoenzyme forms merely by the choice of a particular substrate. It is, therefore, not surprising that none of these prior art methods is highly specific for the direct determination of prostatic acid phosphatase activity; e.g. see Cancer 5:236 (1952); J. Lab. Clin. Med. 82:486 (1973); Clin. Chem. Acta. 44:21 (1973); and J. Physiol. Chem. 356:1775 (1975).

In addition to the aforementioned problems of non-specificity which appear to be inherent in many of the prior art reagents employed for the detection of prostate acid phosphatase, there have been reports of elevated serum acid phosphatase associated with other diseases, which further complicates the problem of obtaining an accurate clinical diagnosis of prostatic cancer. For example, Tuchman et al., Am. J. Med. 27:959 (1959) noted that serum acid phosphatase levels appear to be elevated in patients with Gaucher's disease.

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Due to the inherent difficulties in developing a "specific" substrate for prostate acid phosphatase, several researchers have developed immunochemical methods for the detection of prostate acid phosphatase. However, 5 the previously reported immunochemical methods have drawbacks of their own which have precluded their widespread acceptance. For example, Shulman et al., Immunology 93:474 (1964) described an immuno-diffusion test for the detection of human prostate acid 10 phosphatase. Using antisera prepared from a prostatic fluid antigen obtained by rectal massage from patients with prostatic disease, no cross-reactivity precipitin line was observed in the double diffusion technique against extracts of normal kidney, testicle, liver, and lung. However, this method has the disadvantages of 15 limited sensitivity, even with the large amounts of antigen employed, and of employing antisera which may cross-react with other, antigenically unrelated serum protein components present in prostatic fluid.

WO 79/00475 to Chu et. al. describes a method for the detection of prostatic acid phosphatase isoenzyme patterns associated with prostatic cancer which obviates many of the above drawbacks. However, practical problems are posed by the need for a source of cancerous prostate tissue from which the diagnostically relevant prostatic acid phosphatase isoenzyme patterns associated with prostatic cancer are extracted for the preparation of antibodies thereto.

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In recent years, considerable effort has been spent to identify enzyme or antigen markers for various types of malignancies with the view towards developing specific diagnostic reagents. The ideal tumor marker would exhibit, among other characteristics, tissue or cell-type specificity. Previous investigators have demonstrated the occurrence of human prostate tissue-specific antigens.

- 5 -

Treatment of Prostate Cancer

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As described in W.J. Catalona, "Management of Cancer of the Prostate," New Engl. J. Med.,

331(15):996-1004 (1994), the management of prostate cancer can be achieved by watchful waiting, curative treatment, and palliation.

For men with a life expectancy of less than 10 years, watchful waiting is appropriate where low-grade, low-stage prostate cancer is discovered at the time of a partial prostatectomy for benign hyperplasia. Such cancers rarely progress during the first five years after detection. On the other hand, for younger men, curative treatment is often more appropriate.

Where prostate cancer is localized and the patient's life expectancy is 10 years or more, radical prostatectomy offers the best chance for eradication of the disease. Historically, the drawback of this procedure is that most cancers had spread beyond the bounds of the operation by the time they were detected. However, the use of prostate-specific antigen testing has permitted early detection of prostate cancer. As a result, surgery is less extensive with fewer complications. Patients with bulky, high-grade tumors are less likely to be successfully treated by radical prostatectomy.

After surgery, if there are detectable serum prostate-specific antigen concentrations, persistent cancer is indicated. In many cases, prostate-specific antigen concentrations can be reduced by radiation treatment. However, this concentration often increases again within two years.

Radiation therapy has also been widely used as an alternative to radical prostatectomy. Patients

generally treated by radiation therapy are those who are older and less healthy and those with higher-grade, more clinically advanced tumors. Particularly preferred procedures are external-beam therapy which involves three

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dimensional, conformal radiation therapy where the field of radiation is designed to conform to the volume of tissue treated; interstitial-radiation therapy where seeds of radioactive compounds are implanted using ultrasound guidance; and a combination of external-beam therapy and interstitial-radiation therapy.

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For treatment of patients with locally advanced disease, hormonal therapy before or following radical prostatectomy or radiation therapy has been utilized. 10 Hormonal therapy is the main form of treating men with disseminated prostate cancer. Orchiectomy reduces serum testosterone concentrations, while estrogen treatment is similarly beneficial. Diethylstilbestrol from estrogen is another useful hormonal therapy which has a disadvantage of causing cardiovascular toxicity. When 15 gonadotropin-releasing hormone agonists are administered testosterone concentrations are ultimately reduced. Flutamide and other nonsteroidal, anti-androgen agents block binding of testosterone to its intracellular receptors. As a result, it blocks the effect of 20 testosterone, increasing serum testosterone concentrations and allows patients to remain potent -- a significant problem after radical prostatectomy and radiation treatments.

25 Cytotoxic chemotherapy is largely ineffective in treating prostate cancer. Its toxicity makes such therapy unsuitable for elderly patients. In addition, prostate cancer is relatively resistant to cytotoxic agents.

<u>Use of Monoclonal Antibodies in Prostate Cancer Detection</u> and Treatment

Theoretically, radiolabeled monoclonal

antibodies ("mAbs") offer the potential to enhance both
the sensitivity and specificity of detecting prostatic
cancer within lymph nodes and elsewhere. While many mAbs
have previously been prepared against prostate related

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antigens, none of these mAbs were specifically generated with an imaging objective in mind. Nevertheless, the clinical need has led to evaluation of some of these mAbs as possible imaging agents. Vihko et al., "Radioimaging of Prostatic Carcinoma With Prostatic Acid Phosphatase - Specific Antibodies," <u>Biotechnology in Diagnostics</u>, 131-134 (1985); Babaian et al., "Radioimmunological Imaging of Metastatic Prostatic Cancer With 111-Indium-Labeled Monoclonal Antibody PAY 276,"

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J. Urol., 137:439-443 (1987); Leroy et al.,
"Radioimmunodetection Of Lymph Node Invasion In Prostatic
Cancer. The Use Of Iodine 123 (123-I)-Labeled Monoclonal
Anti-Prostatic Acid Phosphatase (PAP) 227 A F (ab') 2
Antibody Fragments In Vivo, "Cancer, 64:1-5 (1989);

15 Meyers et al., "Development Of Monoclonal Antibody Imaging Of Metastatic Prostatic Carcinoma," <u>The Prostate</u>, 14:209-220 (1989).

In some cases, the monoclonal antibodies developed for detection and/or treatment of prostate cancer recognize antigens specific to malignant prostatic tissues. Such antibodies are thus used to distinguish malignant prostatic tissue (for treatment or detection) from benign prostatic tissue. See U.S. Patent No. 4,970,299 to Bazinet et al. and U.S. Patent No. 4,902,615 to Freeman et al.

Other monoclonal antibodies react with surface antigens on all prostate epithelial cells whether cancerous or benign. See U.S. Patent Nos. 4,446,122 and Re 33,405 to Chu et al., U.S. Patent No. 4,863,851 to

McEwan et al., and U.S. Patent No. 5,055,404 to Ueda et al. However, the antigens detected by these monoclonal antibodies are present in the blood and, therefore, compete with antigens at tumor sites for the monoclonal antibodies. This causes background noise which makes the use of such antibodies inadequate for in vivo imaging. In therapy, such antibodies, if bound to a cytotoxic agent, could be harmful to other organs.

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Horoszewicz et al., "Monoclonal Antibodies to a New Antigenic Marker in Epithelial Prostatic Cells and Serum of Prostatic Cancer Patients," Anticancer Research, 7:927-936 (1987) ("Horoszewicz") and U.S. Patent No. 5,162,504 to Horoszewicz describe an antibody, designated 7E11, which recognizes prostate specific membrane antigen ("PSMA"). Israeli et al., "Molecular Cloning of a Complementary DNA Encoding a Prostate-specific Membrane Antigen, "Cancer Research, 53:227-230 (1993) ("Israeli") describes the cloning and sequencing of PSMA and reports that PSMA is prostate-specific and shows increased expression levels in metastatic sites and in hormonerefractory states. Other studies have indicated that PSMA is more strongly expressed in prostate cancer cells relative to cells from the normal prostate or from a prostate with benign hyperplasia. Furthermore, PSMA is not found in serum (Troyer et al., "Detection and Characterization of the Prostate-Specific Membrane Antigen (PSMA) in Tissue Extracts and Body Fluids, " Int.

These characteristics make PSMA an attractive target for antibody mediated targeting for imaging and therapy of prostate cancer. Imaging studies using indium-labeled 7E11 have indicated that the antibody localizes quite well to both the prostate and to sites of metastasis. In addition, 7E11 appears to have clearly improved sensitivity for detecting lesions compared to other currently available imaging techniques, such as CT and MR imaging or bone scan. Bander, "Current Status of 30 Monoclonal Antibodies for Imaging and Therapy of Prostate Cancer, " Sem. In Oncology, 21:607-612 (1994).

J. Cancer, 62:552-558 (1995)).

However, the use of 7E11 and other known antibodies to PSMA to mediate imaging and therapy has several disadvantages. First, PSMA is an integral membrane protein known to have a short intracellular tail and a long extracellular domain. Biochemical characterization and mapping (Troyer et al., "Biochemical

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Characterization and Mapping of the 7E11-C5.3 Epitope of the Prostate-specific Membrane Antigen, "Urol. Oncol., 1:29-37 (1995)) have shown that the epitope or antigenic site to which the 7E11 antibody binds is present on the intracellular portion of the molecule. Because antibody molecules do not, under normal circumstances, cross the cell membrane unless they bind to the extracellular portion of a molecule and become translocated intracellularly, the 7E11 antibody does not have access to its antigenic target site in an otherwise healthy, viable cell.

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Consequently, imaging using 7E11 is limited to the detection of dead cells within tumor deposits.

Additionally, the therapeutic use of the 7E11 antibody is limited, because only cells that are already dead or tissue containing a large proportion of dead cells can be effectively targeted.

Although the inadequacies and problems in the diagnosis and treatment of one particular type of cancer are the focus of the preceding discussion, prostate cancer is merely a representative model. The diagnosis and treatment of numerous other cancers have similar problems.

The present invention is directed to overcoming
the deficiencies of prior art antibodies in diagnosing
and treating prostate and other types of cancer.

SUMMARY OF THE INVENTION

One aspect of the present invention relates to a method of ablating or killing cancerous cells. The process involves providing a biological agent which, when contacted with an extracellular domain of prostate specific membrane antigen, recognizes the extracellular domain of prostate specific membrane antigen. These biological agents are contacted with vascular endothelial cells proximate to the cancerous cells under conditions

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effective to permit both binding of the biological agent to the vascular endothelial cells proximate to the cancerous cells and killing or ablating of the cancerous cells. The biological agent can be used alone or can be bound to a substance effective to kill or ablate the cancerous cells upon binding of the biological agent to vascular endothelial cells that are proximate to the cancerous cells.

In a particularly preferred embodiment of the 10 method of ablating or killing cancerous cells in accordance with the present invention, the biological agent, when contacted with an extracellular domain of prostate specific membrane antigen, binds to and is internalized with the prostate specific membrane antigen 15 of such cells. Preferred biological agents for use in the method of ablating or killing cancerous cells in accordance with the present invention are antibodies or binding portions thereof, probes, or ligands. methods of the present invention are particularly useful 20 in killing or ablating renal, urothelial, colon, rectal, lung, and breast cancerous cells and cancerous cells of metastatic adenocarcinoma to the liver. Another aspect of the present invention relates to a method of detecting cancerous tissue in a biological 25 sample. This method involves providing a biological agent which, when contacted with an extracellular domain of prostate specific membrane antigen, binds to the extracellular domain of prostate specific membrane antigen. The biological agent is bound to a label 30 effective to permit detection of vascular endothelial cells proximate to or within the cancerous tissue upon binding of the biological agent to the vascular endothelial cells proximate to or within the cancerous tissue. The biological sample is contacted with the 35 biological agent having a label under conditions effective to permit binding of the biological agent to the vascular endothelial cells proximate to or within the

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cancerous tissue in the biological sample. The presence of cancerous tissue in the biological sample is detected by detection of the label.

In a particularly preferred embodiment of the method of detecting cancerous tissue in accordance with the present invention, the biological agent is one that, when contacted with an extracellular domain of prostate specific membrane antigen, binds to and is internalized with the prostate specific membrane antigen. Preferred biological agents for use in the method of detecting cancerous tissue in accordance with the present invention are antibodies or binding portions thereof, probes, or ligands. The method is especially useful in detecting renal, urothelial, colon, rectal, lung, and breast cancerous tissue and cancerous tissue of metastatic adenocarcinoma to the liver.

Still another aspect of the present invention relates to a method of ablating or killing normal, benign hyperplastic, and cancerous prostate epithelial cells.

The process involves providing a biological agent which recognizes an extracellular domain of prostate specific membrane antigen. The biological agent can be used alone or can be bound to a substance effective to kill the cells upon binding of the biological agent to the cells.

These biological agents are then contacted with the cells under conditions effective to permit both binding of the biological agent to the extracellular domain of the prostate specific membrane antigen and killing or ablating of the cells.

In a particularly preferred embodiment of the method of ablating or killing normal, benign hyperplastic, and cancerous prostate epithelial cells in accordance with the present invention, the biological agent binds to and is internalized with the prostate specific membrane antigen of such cells. Preferred biological agents for use in the method of ablating or killing normal, benign hyperplastic, and cancerous

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prostate epithelial cells in accordance with the present invention are antibodies or binding portions thereof, probes, or ligands.

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Another aspect of the present invention relates to a method of detecting normal, benign hyperplastic, and cancerous prostate epithelial cells or portions thereof in a biological sample. This method involves providing a biological agent which binds to an extracellular domain of prostate specific membrane antigen. The biological agent is bound to a label effective to permit detection of the cells or portions thereof upon binding of the biological agent to the cells or portions thereof. biological sample is contacted with the biological agent having a label under conditions effective to permit binding of the biological agent to the extracellular domain of the prostate specific membrane antigen of any of the cells or portions thereof in the biological sample. The presence of any cells or portions thereof in the biological sample is detected by detection of the label.

In a particularly preferred embodiment of the method of detecting normal, benign hyperplastic, and cancerous prostate epithelial cells in accordance with the present invention, the biological agent binds to and is internalized with the prostate specific membrane antigen of such cells. Preferred biological agents for use in the method of detecting normal, benign hyperplastic, and cancerous prostate epithelial cells in accordance with the present invention are antibodies or binding portions thereof, probes, or ligands.

Another aspect of the present invention pertains to a biological agent that recognizes an extracellular domain of prostate specific membrane antigen. In a preferred embodiment, the isolated biological agent binds to and is internalized with the prostate specific membrane antigen. Preferred isolated biological agents which recognize an extracellular domain

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of prostate specific membrane antigen in accordance with the present invention are isolated antibodies or binding portions thereof, probes, or ligands. Hybridoma cell lines that produce monoclonal antibodies of these types are also disclosed.

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The biological agents of the present invention recognize the extracellular domain of antigens of normal, benign hyperplastic, and cancerous prostate epithelial cells. Unlike the 7E11 antibody, which recognizes an epitope of prostate-associated antigens which are exposed extracellularly only after cell lysis, the biological agents of the present invention bind to antigenic epitopes which are extraceIlularly exposed in living prostate cells. Using the biological agents of the present invention, living, unfixed normal, benign hyperplastic, and cancerous prostate epithelial cells can be targeted, which makes treatment and diagnosis more effective. In a preferred embodiment for treating prostate cancer, the biological agents of the present invention also bind to and are internalized with the prostate specific membrane antigen, which permits the therapeutic use of intracellularly acting cytotoxic agents.

BRIEF DESCRIPTION OF THE DRAWINGS

Figure 1 is an immuno-electron micrograph of gold-labeled monoclonal antibody J591 on the surface of LNCaP cells after incubation at 4°C.

Figure 2 is an immuno-electron micrograph of LNCaP cells treated with gold-labeled monoclonal antibody J591 after 5 minutes incubation at 37°C.

Figure 3 is an immuno-electron micrograph of LNCaP cells treated with gold-labeled monoclonal antibody J591 after 10 minutes incubation at 37°C.

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Figure 4 is an immuno-electron micrograph of LNCaP cells treated with gold-labeled monoclonal antibody J591 after 15 minutes incubation at 37°C.

Figure 5 is an immuno-electron micrograph of LNCaP cells treated with gold-labeled monoclonal antibody J591 after 15 minutes at 37°C showing J591 within endosomes.

Figure 6 summarizes the sequencing strategy of the heavy chain of monoclonal antibody J591.

Figure 7 shows the nucleotide sequence of the heavy chain of monoclonal antibody J591 (designated SEQ.ID. No. 1), the nucleotide sequence of the corresponding reverse, non-coding strand (designated SEQ. ID. No. 2), and the corresponding deduced amino acid sequences (designated SEQ. ID. Nos. 3, 4, and 5).

Figure 8 is a comparison of the heavy chain of monoclonal antibody J591 with the consensus sequence for Mouse Heavy Chains Subgroup IIA.

Figure 9 summarizes the sequencing strategy of the kappa light chain of monoclonal antibody J591.

Figure 10 shows the nucleotide sequences of the kappa light chain of monoclonal antibody J591 (designated SEQ.ID. No. 9), the nucleotide sequence of the corresponding reverse, non-coding strand (designated SEQ.ID. No. 10) and the corresponding deduced amino acid.

ID. No. 10), and the corresponding deduced amino acid sequence (designated SEQ. ID. Nos. 11, 12, and 13).

Figure 11 is a comparison of the kappa light chain of monoclonal antibody J591 with the consensus sequence for Mouse Kappa Chains Subgroup V.

Figures 12A-12F are micrographs (250 x magnification) showing the immunohistochemical reactivity of mAb J591 to neovasculature of various carcinomas.

DETAILED DESCRIPTION OF THE INVENTION

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One aspect of the present invention relates to a method of ablating or killing normal, benign

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hyperplastic, and cancerous prostate epithelial cells. The process involves providing a biological agent, such as an antibody or binding portion thereof, probe, or ligand, which binds to an extracellular domain of prostate specific membrane antigen of (i.e., a portion of prostate specific membrane antigen which is external to) such cells. The biological agent can be used alone or can be bound to a substance effective to kill the cells upon binding of the biological agent to the cells. biological agents are then contacted with the cells under 10 conditions effective to permit both binding of the biological agent to the extracellular domain of the prostate specific membrane antigen and killing or ablating of the cells. In its preferred form, such contacting is carried out in a living mammal by 15 administering the biological agent to the mammal under conditions effective to permit both binding of the biological agent to the extracellular domain of the prostate specific membrane antigen and killing or 20 ablating of the cells. Such administration can be carried out orally or parenterally.

In a particularly preferred embodiment of the method of ablating or killing normal, benign hyperplastic, and cancerous prostate epithelial cells in accordance with the present invention, the biological agent binds to and is internalized with the prostate specific membrane antigen of such cells. Again, the biological agent can be used alone. Alternatively, the biological agent can be bound to a substance effective to kill the cells upon binding of the biological agent to prostate specific membrane antigen and upon internalization of the biological agent with the prostate specific membrane antigen.

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The mechanism by which the biological agent is internalized with the prostate specific membrane antigen is not critical to the practice of the present invention. For example, the biological agent can induce

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internalization of the prostate specific membrane antigen. Alternatively, internalization of the biological agent can be the result of routine internalization of prostate specific membrane antigen.

5 The above-described biological agents (i.e., biological agents, such as an antibody or binding portion thereof, probe, or ligand which, when contacted with an extracellular domain of prostate specific membrane antigen, recognizes the extracellular domain of prostate 10 specific membrane antigen and, preferably, is internalized therewith) can be used to ablate or kill cancerous cells. In this aspect of the present invention, the biological agent can be used alone or can be bound to a substance effective to kill the cancerous cells upon binding of the biological agent to vascular 15 endothelial cells proximate thereto. These biological agents are contacted with vascular endothelial cells proximate to the cancerous cells. The contacting is carried out under conditions that are effective to permit 20 binding of the biological agent to the vascular endothelial cells proximate to the cancerous cells and, in addition, that are effective to kill or ablate the cancerous cells. The mechanism by which the cancerous cells are killed or ablated is not critical to the practice of the present invention. For example, the 25 cancerous cells can be killed or ablated directly by the biological agent as a consequence of their proximity to the vascular endothelial cells to which the biological agent binds. Alternatively, the biological agent can 30 kill, ablate, or otherwise change the properties of the vascular endothelial cells to which it binds so that blood flow to the cancerous cells proximate thereto is stopped or otherwise reduced, thereby causing the cancerous cells to be killed or ablated. Thus, the 35 method of the present invention is particularly useful for killing or ablating vascular endothelial cells in

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cancerous tissue as well as the cancerous cells contained in cancerous tissue.

In a particularly preferred embodiment of the method of ablating or killing cancerous cells in 5 accordance with the present invention, the biological agent employed is one that, when contacted with an extracellular domain of prostate specific membrane antigen, binds to and is internalized with the extracellular domain of prostate specific membrane The methods of the present invention are 10 particularly useful to kill or ablate cancerous prostate epithelial cells as well as cancerous cells other than cancerous prostate epithelial cells. Examples of cancerous cells which are not cancerous prostate epithelial cells are renal, urothelial, colon, rectal, 15 lung, and breast cancerous cells and cancerous cells of metastatic adenocarcinoma to the liver. Although the method of the present invention can be used to kill or ablate any cell which expresses an extracellular domain 20 of prostate specific membrane antigen or a portion thereof or whose subsistence is dependent upon cells which express an extracellular domain of prostate specific membrane antigen or a portion thereof, the method of the present invention is particularly useful to 25 kill or ablate cancerous cells, because the vascular endothelial cells supplying blood to cancerous tissues (e.q., tumors, collections of cancerous cells, or other cancerous masses) express an extracellular domain of prostate specific membrane antigen, irrespective of the type of cancer involved. In contrast, vascular 30 endothelial cells supplying blood to normal tissues do not express an extracellular domain of prostate specific membrane antigen.

Another aspect of the present invention relates to a method of detecting normal, benign hyperplastic, and cancerous epithelial cells or portions thereof in a biological sample. This method involves providing a

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biological agent, such as an antibody or binding portion thereof, probe, or ligand, which binds to an extracellular domain of prostate specific membrane antigen of such cells. The biological agent is bound to 5 a label effective to permit detection of the cells or portions (e.g., prostate specific membrane antigen or fragments thereof liberated from such normal, benign hyperplastic, and cancerous cells) thereof upon binding of the biological agent to the cells or portions thereof. The biological sample is contacted with the biological 10 agent having a label under conditions effective to permit binding of the biological agent to the extracellular domain of the prostate specific membrane antigen of any of the cells or portions thereof in the biological The presence of any cells or portions thereof in 15 the biological sample is detected by detection of the label. In its preferred form, such contacting is carried out in a living mammal and involves administering the biological agent to the mammal under conditions effective to permit binding of the biological agent to the prostate 20 specific membrane antigen of any of the cells or portions thereof in the biological sample. Again, such administration can be carried out orally or parenterally.

The method of the present invention can be used 25 to screen patients for diseases associated with the presence of normal, benign hyperplastic, and cancerous epithelial cells or portions thereof. Alternatively, it can be used to identify the recurrence of such diseases, particularly when the disease is localized in a 30 particular biological material of the patient. For example, recurrence of prostatic disease in the prostatic fossa may be encountered following radical prostatectomy. Using the method of the present invention, this recurrence can be detected by administering a short range radiolabeled antibody to the mammal and then detecting the label rectally, such as with a transrectal detector probe.

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Alternatively, the contacting step can be carried out in a sample of serum or urine or other body fluids, such as to detect the presence of PSMA in the body fluid. When the contacting is carried out in a serum or urine sample, it is preferred that the biological agent recognize substantially no antigens circulating in the blood other than PSMA. Since intact prostate cells do not excrete or secrete PSMA into the extracellular environment, detecting PSMA in serum, urine, or other body fluids generally indicates that prostate cells are being lysed. Thus, the biological agents and methods of the present invention can be used to determine the effectiveness of a prostate cancer treatment protocol by monitoring the level of PSMA in serum, urine or other body fluids.

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In a particularly preferred embodiment of the method of detecting normal, benign hyperplastic, and cancerous prostate epithelial cells in accordance with the present invention, the biological agent, such as the antibody or binding portion thereof, probe, or ligand, binds to and is internalized with the prostate specific membrane antigen of such cells. Again, the biological agent is bound to a label effective to permit detection of the cells or portions thereof upon binding of the biological agent with the prostate specific membrane antigen.

Another aspect of the present invention relates to a method of detecting cancerous tissue in a biological sample. This method involves providing the above-described biological agent (i.e., a biological agent, such as an antibody or binding portion thereof, probe, or ligand which, when contacted with an extracellular domain of prostate specific membrane antigen, recognizes the extracellular domain of prostate specific membrane antigen). The biological agent is bound to a label that is effective to permit detection of vascular endothelial cells proximate to or within the cancerous tissue upon

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binding of the biological agent to vascular endothelial cells proximate to or within the cancerous tissue. The biological sample is then contacted with the biological agent having a label. Contacting is carried out under conditions effective to permit binding of the biological agent to the vascular endothelial cells proximate to or within the cancerous tissue in the biological sample. The presence of cancerous cells or portions thereof in the biological sample is detected by detection of the label.

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Rather than contacting the entire biological sample with the biological agent, it is contemplated that a portion of the biological sample can be used. example, a tissue biopsy sample can be contacted with the biological agent to determine the presence of cancerous tissue in the tissue biopsy sample as well as in the larger biological sample from which it is taken. Alternatively, the biological agent can be contacted with a serum or urine sample to acertain whether any vascular endothelial cells expressing an extracellular domain of prostate specific membrane antigen are present therein. Since vascular endothelial cells expressing an extracellular domain of prostate specific membrane antigen are found in the vasculature of cancerous tissues but not in the vasculature of normal tissues, detection of the label in a serum or urine sample indicates the presence of cancerous tissue in the larger biological sample from which it is taken (e.g., a patient).

In a particularly preferred embodiment of the
method of detecting cancerous tissues in accordance with
the present invention, the biological agent employed is
one that, when contacted with an extracellular domain of
prostate specific membrane antigen, binds to and is
internalized with the prostate specific membrane antigen.

The methods of the present invention can be used to
detect cancerous prostate epithelial cells as well as
cancerous tissues containing cancerous cells other than

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cancerous prostate epithelial cells. Examples of cancerous tissues containing cancerous cells other than cancerous prostate epithelial cells which can be detected with the methods of the present invention include renal, urothelial, colon, rectal, lung, and breast cancerous tissue and cancerous tissue of metastatic adenocarcinoma to the liver.

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As indicated above, biological agents suitable for either killing, ablating, or detecting cancerous cells and normal, benign hyperplastic, and cancerous 10 prostate epithelial cells include antibodies, such as monoclonal or polyclonal antibodies. In addition, antibody fragments, half-antibodies, hybrid derivatives, probes, and other molecular constructs may be utilized. These biological agents, such as antibodies, binding 15 portions thereof, probes, or ligands, bind to extracellular domains of prostate specific membrane antigens or portions thereof in normal, benign hyperplastic, and cancerous prostate epithelial cells. 20 As a result, when practicing the methods of the present invention to kill, ablate, or detect normal, benign hyperplastic, and cancerous prostate epithelial cells, the biological agents bind to all such cells, not only to cells which are fixed or cells whose intracellular 25 antigenic domains are otherwise exposed to the extracellular environment. Consequently, binding of the biological agents is concentrated in areas where there are prostate epithelial cells, irrespective of whether these cells are fixed or unfixed, viable or necrotic. 30 Additionally or alternatively, these biological agents, such as antibodies, binding portions thereof, probes, or ligands, bind to and are internalized with prostate specific membrane antigens or portions thereof in normal, benign hyperplastic, and cancerous prostate epithelial 35 cells.

Monoclonal antibody production may be effected by techniques which are well-known in the art.

Basically, the process involves first obtaining immune cells (lymphocytes) from the spleen of a mammal (e.g., mouse) which has been previously immunized with the antigen of interest either in vivo or in vitro. antibody-secreting lymphocytes are then fused with (mouse) myeloma cells or transformed cells, which are capable of replicating indefinitely in cell culture, thereby producing an immortal, immunoglobulin-secreting The resulting fused cells, or hybridomas, are cultured, and the resulting colonies screened for the production of the desired monoclonal antibodies. Colonies producing such antibodies are cloned, and grown either in vivo or in vitro to produce large quantities of antibody. A description of the theoretical basis and practical methodology of fusing such cells is set forth in Kohler and Milstein, Nature 256:495 (1975), which is hereby incorporated by reference.

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Mammalian lymphocytes are immunized by in vivo immunization of the animal (e.g., a mouse) with the protein or polypeptide of the present invention. Such immunizations are repeated as necessary at intervals of up to several weeks to obtain a sufficient titer of antibodies. Following the last antigen boost, the animals are sacrificed and spleen cells removed.

Fusion with mammalian myeloma cells or other fusion partners capable of replicating indefinitely in cell culture is effected by standard and well-known techniques, for example, by using polyethylene glycol ("PEG") or other fusing agents (See Milstein and Kohler, Eur. J. Immunol. 6:511 (1976), which is hereby incorporated by reference). This immortal cell line, which is preferably murine, but may also be derived from cells of other mammalian species, including but not limited to rats and humans, is selected to be deficient in enzymes necessary for the utilization of certain nutrients, to be capable of rapid growth, and to have good fusion capability. Many such cell lines are known

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to those skilled in the art, and others are regularly described.

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Procedures for raising polyclonal antibodies are also well known. Typically, such antibodies can be raised by administering the protein or polypeptide of the present invention subcutaneously to New Zealand white rabbits which have first been bled to obtain pre-immune serum. The antigens can be injected at a total volume of 100 μ l per site at six different sites. Each injected material will contain synthetic surfactant adjuvant pluronic polyols, or pulverized acrylamide gel containing the protein or polypeptide after SDS-polyacrylamide gel electrophoresis. The rabbits are then bled two weeks after the first injection and periodically boosted with the same antigen three times every six weeks. A sample of serum is then collected 10 days after each boost. Polyclonal antibodies are then recovered from the serum by affinity chromatography using the corresponding antigen to capture the antibody. Ultimately, the rabbits are euthenized with pentobarbital 150 mg/Kg IV. This and other procedures for raising polyclonal antibodies are disclosed in E. Harlow, et. al., editors, Antibodies: A Laboratory Manual (1988), which is hereby incorporated by reference.

25 In addition to utilizing whole antibodies, the processes of the present invention encompass use of binding portions of such antibodies. Such binding portions include Fab fragments, F(ab')2 fragments, and Fv fragments. These antibody fragments can be made by conventional procedures, such as proteolytic 30 fragmentation procedures, as described in J. Goding, Monoclonal Antibodies: Principles and Practice, pp. 98-118 (N.Y. Academic Press 1983), which is hereby incorporated by reference.

35 Alternatively, the processes of the present invention can utilize probes or ligands found either in nature or prepared synthetically by recombinant DNA

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procedures or other biological or molecular procedures. Suitable probes or ligands are molecules which bind to the extracellular domains of prostate specific membrane antigens identified by the monoclonal antibodies of the present invention. Other suitable probes or ligands are molecules which bind to and are internalized with prostate specific membrane antigens. Such probes or ligands can be, for example, proteins, peptides, lectins, or nucleic acid probes.

10 It is particularly preferred to use the monoclonal antibodies identified below in Table 1.

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TABLE 1

15	Monoclonal Antibody Name	ATCC Designation for Hybridoma Cell Line
	E99	HB-12101
	J415	HB-12109
	J533	HB-12127
20	J591	HB-12126

These antibodies can be used alone or as a component in a mixture with other antibodies or other biological agents to treat cancers or image cancerous tissues (particularly the vascular endothelial cells therein) or prostate epithelial cells with varying surface antigen characteristics.

Regardless of whether the biological agents are
used for treatment or diagnosis, they can be administered
orally, parenterally, subcutaneously, intravenously,
intramuscularly, intraperitoneally, by intranasal
instillation, by intracavitary or intravesical
instillation, intraocularly, intraarterially,
intralesionally, or by application to mucous membranes,
such as, that of the nose, throat, and bronchial tubes.
They may be administered alone or with pharmaceutically
or physiologically acceptable carriers, excipients, or
stabilizers, and can be in solid or liquid form such as,

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tablets, capsules, powders, solutions, suspensions, or emulsions.

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The solid unit dosage forms can be of the conventional type. The solid form can be a capsule, such as an ordinary gelatin type containing the biological agent, such as an antibody or binding portion thereof, of the present invention and a carrier, for example, lubricants and inert fillers such as, lactose, sucrose, or cornstarch. In another embodiment, these compounds are tableted with conventional tablet bases such as lactose, sucrose, or cornstarch in combination with binders like acacia, cornstarch, or gelatin, disintegrating agents such as, cornstarch, potato starch, or alginic acid, and a lubricant like stearic acid or magnesium stearate.

The biological agent of the present invention may also be administered in injectable dosages by solution or suspension of these materials in a physiologically acceptable diluent with a pharmaceutical carrier. Such carriers include sterile liquids such as water and oils, with or without the addition of a surfactant and other pharmaceutically and physiologically acceptable carrier, including adjuvants, excipients or stabilizers. Illustrative oils are those of petroleum, animal, vegetable, or synthetic origin, for example, peanut oil, soybean oil, or mineral oil. In general, water, saline, aqueous dextrose and related sugar solution, and glycols such as, propylene glycol or polyethylene glycol, are preferred liquid carriers, particularly for injectable solutions.

For use as aerosols, the biological agent of the present invention in solution or suspension may be packaged in a pressurized aerosol container together with suitable propellants, for example, hydrocarbon propellants like propane, butane, or isobutane with conventional adjuvants. The materials of the present

invention also may be administered in a non-pressurized form such as in a nebulizer or atomizer.

The biological agents may be utilized to detect cancerous tissues (particularly the vascular endothelial cells therein) and normal, benign hyperplastic, and cancerous prostate epithelial cells *in vivo*. This is achieved by labeling the biological agent, administering the labeled biological agent to a mammal, and then imaging the mammal.

10 Examples of labels useful for diagnostic imaging in accordance with the present invention are radiolabels such as 131 I, 111 In, 123 I, 99 mTc, 32 P, 125 I, 3H, 14C, and 188Rh, fluorescent labels such as fluorescein and rhodamine, nuclear magnetic resonance active labels. 15 positron emitting isotopes detectable by a positron emission tomography ("PET") scanner, chemiluminescers such as luciferin, and enzymatic markers such as peroxidase or phosphatase. Short-range radiation emitters, such as isotopes detectable by short-range 20 detector probes, such as a transrectal probe, can also be employed. These isotopes and transrectal detector probes, when used in combination, are especially useful in detecting prostatic fossa recurrences and pelvic nodal The biological agent can be labeled with such 25 reagents using techniques known in the art. For example, see Wensel and Meares, Radioimmunoimaging and Radioimmunotherapy, Elsevier, New York (1983), which is hereby incorporated by reference, for techniques relating to the radiolabeling of antibodies. See also, D. Colcher 30 et al., "Use of Monoclonal Antibodies as Radiopharmaceuticals for the Localization of Human · Carcinoma Xenografts in Athymic Mice", Meth. Enzymol. 121: 802-816 (1986), which is hereby incorporated by reference.

A radiolabeled biological agent of this invention can be used for *in vitro* diagnostic tests. The specific activity of a tagged biological agent, such as a

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tagged antibody, binding portion thereof, probe, or ligand, depends upon the half-life, the isotopic purity of the radioactive label, and how the label is incorporated into the biological agent. Table 2 lists several commonly-used isotopes, their specific activities and half-lives. In immunoassay tests, the higher the specific activity, in general, the better the sensitivity.

10 TABLE 2

<u>Isotope</u> 15	Specific Activity of Pure <u>Isotope</u> <u>Isotope (Curies/mole)</u>		
14C 3H 35S 125I 20 32p 131T	6.25×10^{1} 2.01×10^{4} 1.50×10^{6} 2.18×10^{6} 3.16×10^{6} 1.62×10^{7}	5720 years 12.5 years 87 days 60 days 14.3 days 8.1 days	

Procedures for labeling biological agents with the radioactive isotopes listed in Table 2 are generally 25 known in the art. Tritium labeling procedures are described in U.S. Patent No. 4,302,438, which is hereby incorporated by reference. Iodinating, tritium labeling, and 35S labeling procedures especially adapted for murine 30 monoclonal antibodies are described by Goding, J.W. (supra, pp 124-126) and the references cited therein, which are hereby incorporated by reference. Other procedures for iodinating biological agents, such as antibodies, binding portions thereof, probes, or ligands, are described by Hunter and Greenwood, Nature 144:945 35 (1962), David et al., <u>Biochemistry</u> 13:1014-1021 (1974), and U.S. Patent Nos. 3,867,517 and 4,376,110, which are hereby incorporated by reference. Radiolabeling elements which are useful in imaging include 123I, 131I, 111In, and 99mTc, for example. Procedures for iodinating biological 40 agents are described by Greenwood, F. et al., Biochem. J. 89:114-123 (1963); Marchalonis, J., Biochem. J. 113:299-305 (1969); and Morrison, M. et al.,

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Immunochemistry, 289-297 (1971), which are hereby
incorporated by reference. Procedures for 99mTc-labeling
are described by Rhodes, B. et al. in Burchiel, S. et al.
(eds.), Tumor Imaging: The Radioimmunochemical Detection
of Cancer, New York: Masson 111-123 (1982) and the
references cited therein, which are hereby incorporated
by reference. Procedures suitable for 111In-labeling
biological agents are described by Hnatowich, D.J. et
al., J. Immul. Methods, 65:147-157 (1983), Hnatowich, D.
et al., J. Applied Radiation, 35:554-557 (1984), and
Buckley, R. G. et al., F.E.B.S. 166:202-204 (1984), which
are hereby incorporated by reference.

In the case of a radiolabeled biological agent, the biological agent is administered to the patient, is localized to the tumor bearing the antigen with which the 15 biological agent reacts, and is detected or "imaged" in vivo using known techniques such as radionuclear scanning using e.g., a gamma camera or emission tomography. e.g., A.R. Bradwell et al., "Developments in Antibody 20 Imaging", Monoclonal Antibodies for Cancer Detection and Therapy, R.W. Baldwin et al., (eds.), pp. 65-85 (Academic Press 1985), which is hereby incorporated by reference. Alternatively, a positron emission transaxial tomography scanner, such as designated Pet VI located at 25 Brookhaven National Laboratory, can be used where the radiolabel emits positrons (e.g., 11C, 18F, 15O, and 13N).

Fluorophore and chromophore labeled biological agents can be prepared from standard moieties known in the art. Since antibodies and other proteins absorb

30 light having wavelengths up to about 310 nm, the fluorescent moieties should be selected to have substantial absorption at wavelengths above 310 nm and preferably above 400 nm. A variety of suitable fluorescers and chromophores are described by Stryer,

35 Science, 162:526 (1968) and Brand, L. et al., Annual Review of Biochemistry, 41:843-868 (1972), which are hereby incorporated by reference. The biological agents

can be labeled with fluorescent chromophore groups by conventional procedures such as those disclosed in U.S. Patent Nos. 3,940,475, 4,289,747, and 4,376,110, which are hereby incorporated by reference.

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One group of fluorescers having a number of the desirable properties described above are the xanthene dyes, which include the fluoresceins derived from 3,6-dihydroxy-9-henylxanthhydrol and resamines and rhodamines derived from 3,6-diamino-9-phenylxanthydrol and lissanime rhodamine B. The rhodamine and fluorescein derivatives of 9-o-carboxyphenylxanthhydrol have a 9-o-carboxyphenyl group. Fluorescein compounds having reactive coupling groups such as amino and isothiocyanate groups such as fluorescein isothiocyanate and fluorescamine are readily available. Another group of fluorescent compounds are the naphthylamines, having an amino group in the α or β position.

Biological agents can be labeled with fluorchromes or chromophores by the procedures described by Goding, J. (supra, pp 208-249). The biological agents can be labeled with an indicating group containing the NMR-active 19F atom, or a plurality of such atoms inasmuch as (i) substantially all of naturally abundant fluorine atoms are the 19F isotope and, thus, substantially all fluorine-containing compounds are NMR-active; (ii) many chemically active polyfluorinated compounds such as trifluoracetic anhydride are commercially available at relatively low cost, and (iii) many fluorinated compounds have been found medically acceptable for use in humans such as the perfluorinated polyethers utilized to carry oxygen as hemoglobin replacements. After permitting such time for incubation, a whole body NMR determination is carried out using an apparatus such as one of those described by Pykett, Scientific American, 246:78-88 (1982), which is hereby incorporated by reference, to locate and image cancerous tissues (particularly the

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vascular endothelial cells therein) and prostate epithelial cells.

In cases where it is important to distinguish between regions containing live and dead prostate 5 epithelial cells or to distinguish between live and dead prostate epithelial cells, the antibodies of the present invention (or other biological agents of the present invention), labeled as described above, can be coadministered along with an antibody or other biological 10 agent which recognizes only living or only dead prostate epithelial cells labeled with a label which can be distinguished from the label used to label the subject antibody. By monitoring the concentration of the two labels at various locations or times, spatial and 15 temporal concentration variations of living and dead normal, benign hyperplastic, and cancerous prostate epithelial cells can be ascertained. In particular, this method can be carried out using the labeled antibodies of the present invention, which recognize both living and 20 dead epithelial prostate cells, and labeled 7E11 antibodies, which recognize only dead epithelial prostate cells.

The biological agents can also be utilized to kill or ablate cancerous cells and normal, benign 25 hyperplastic, and cancerous prostate epithelial cells in This involves using the biological agents by themselves or with a cytotoxic drug to which the biological agents of the present invention (i.e., biological agents recognizing normal, benign 30 hyperplastic, and cancerous prostate epithelial cells) are bound. This involves administering the biological agents bonded to a cytotoxic drug to a mammal requiring such treatment. In the case of normal, benign hyperplastic, and cancerous prostate epithelial cells, 35 since the biological agents recognize prostate epithelial cells, any such cells to which the biological agents bind are destroyed. Although such administration may destroy

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normal prostate epithelial cells, this is not problematic, because the prostate is not required for life or survival. Although the prostate may indirectly contribute to fertility, this is not likely to be a practical consideration in patients receiving the treatment of the present invention. In the case of cancerous tissues, since the biological agents recognize vascular endothelial cells that are proximate to cancerous cells, binding of the biological

agent/cytotoxic drug complex to these vascular 10 endothelial cells destroys them, thereby cutting off the blood flow to the proximate cancerous cells and, thus, killing or ablating these cancerous cells.

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Alternatively, the biological agents, by virtue of their binding to vascular endothelial cells that are proximate to cancerous cells, are localized proximate to the cancerous cells. Thus, by use of suitable biological agents (including those containing substances effective to kill cells nondiscriminatingly but only over a short range), cells in cancerous tissue (including cancerous cells) can be selectively killed or ablated.

The biological agents of the present invention may be used to deliver a variety of cytotoxic drugs including therapeutic drugs, a compound emitting radiation, molecules of plants, fungal, or bacterial origin, biological proteins, and mixtures thereof. cytotoxic drugs can be intracellularly acting cytotoxic drugs, such as short-range radiation emitters, including, for example, short-range, high-energy α -emitters.

Enzymatically active toxins and fragments thereof are exemplified by diphtheria toxin A fragment, nonbinding active fragments of diphtheria toxin, exotoxin A (from Pseudomonas aeruginosa), ricin A chain, abrin A chain, modeccin A chain, α -sacrin, certain 35 Aleurites fordii proteins, certain Dianthin proteins, Phytolacca americana proteins (PAP, PAPII and PAP-S), Morodica charantia inhibitor, curcin, crotin, Saponaria

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officinalis inhibitor, gelonin, mitogillin, restrictocin, phenomycin, and enomycin, for example. Procedures for preparing enzymatically active polypeptides of the immunotoxins are described in W084/03508 and W085/03508, which are hereby incorporated by reference. Certain cytotoxic moieties are derived from adriamycin, chlorambucil, daunomycin, methotrexate, neocarzinostatin, and platinum, for example.

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Procedures for conjugating the biological 10 agents with the cytotoxic agents have been previously described. Procedures for conjugating chlorambucil with antibodies are described by Flechner, I, . European Journal of Cancer, 9:741-745 (1973); Ghose, T. et al., British Medical Journal, 3:495-499 (1972); and Szekerke, M., et al., Neoplasma, 19:211-215 (1972), which are 15 hereby incorporated by reference. Procedures for conjugating daunomycin and adriamycin to antibodies are described by Hurwitz, E. et al., Cancer Research, 35:1175-1181 (1975) and Arnon, R. et al. <u>Cancer Surveys</u>, 20 1:429-449 (1982), which are hereby incorporated by reference. Procedures for preparing antibody-ricin conjugates are described in U.S. Patent No. 4,414,148 and by Osawa, T., et al. Cancer Surveys, 1:373-388 (1982) and the references cited therein, which are hereby 25 incorporated by reference. Coupling procedures as also described in EP 86309516.2, which is hereby incorporated by reference.

In a particularly preferred embodiment of the present invention, especially well-suited for killing or ablating normal, benign hyperplastic, and cancerous prostate epithelial cells, a first biological agent is conjugated with a prodrug which is activated only when in close proximity with a prodrug activator. The prodrug activator is conjugated with a second biological agent according to the present invention, preferably one which binds to a non-competing site on the prostate specific membrane antigen molecule. Whether two biological agents

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bind to competing or non-competing binding sites can be determined by conventional competitive binding assays. For example, monoclonal antibodies J591, J533, and E99 bind to competing binding sites on the prostate specific membrane antigen molecule. Monoclonal antibody J415, on the other hand, binds to a binding site which is noncompeting with the site to which J591, J533, and E99 Thus, for example, the first biological agent can be one of J591, J533, and E99, and the second biological agent can be J415. Alternatively, the first biological agent can be J415, and the second biological agent can be one of J591, J533, and E99. Drug-prodrug pairs suitable for use in the practice of the present invention are described in Blakely et al., "ZD2767, an Improved System for Antibody-directed Enzyme Prodrug Therapy That Results in Tumor Regressions in Colorectal Tumor Xenografts," Cancer Research, 56:3287-3292 (1996), which is hereby incorporated by reference.

Alternatively, the biological agent can be 20 coupled to high energy radiation emitters, for example, a radioisotope, such as 131 I, a γ -emitter, which, when localized at the tumor site, results in a killing of several cell diameters. See, e.g., S.E. Order, "Analysis, Results, and Future Prospective of the 25 Therapeutic Use of Radiolabeled Antibody in Cancer Therapy", Monoclonal Antibodies for Cancer Detection and Therapy, R.W. Baldwin et al. (eds.), pp 303-316 (Academic Press 1985), which is hereby incorporated by reference. Other suitable radioisotopes include α -emitters, such as ^{212}Bi , ^{213}Bi , and ^{211}At , and β -emitters, such as ^{186}Re and ^{90}Y . 30 Radiotherapy is expected to be particularly effective, because prostate epithelial cells and vascular endothelial cells within cancers are relatively radiosensitive.

Where the biological agents are used alone to kill or ablate cancerous cells or prostate epithelial cells, such killing or ablation can be effected by

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initiating endogenous host immune functions, such as complement-mediated or antibody-dependent cellular cytotoxicity.

The biological agent of the present invention can be used and sold together with equipment, as a kit, to detect the particular label.

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Biological agents of the present invention can be used in conjunction with other therapeutic treatment modalities. Such other treatments include surgery, radiation, cryosurgery, thermotherapy, hormone treatment, chemotherapy, vaccines, and other immunotherapies.

Also encompassed by the present invention is a method of killing or ablating which involves using the biological agents for prophylaxis. For example, these materials can be used to prevent or delay development or progression of prostate or other cancers.

Use of the therapeutic methods of the present invention to treat prostate and other cancers has a number of benefits. Since the biological agents according to the present invention only target cancerous cells (such as cells of cancerous tissues containing vascular endothelial cells) and prostate epithelial cells, other tissue is spared. As a result, treatment with such biological agents is safer, particularly for elderly patients. Treatment according to the present invention is expected to be particularly effective, because it directs high levels of biological agents, such as antibodies or binding portions thereof, probes, or ligands, to the bone marrow and lymph nodes where prostate cancer metastases and metastases of many other cancers predominate. Moreover, the methods of the present invention are particularly well-suited for treating prostate cancer, because tumor sites for prostate cancer tend to be small in size and, therefore, easily destroyed by cytotoxic agents. Treatment in accordance with the present invention can be effectively monitored with clinical parameters, such as, in the case

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of prostate cancer, serum prostate specific antigen and/or pathological features of a patient's cancer, including stage, Gleason score, extracapsular, seminal, vesicle or perineural invasion, positive margins, involved lymph nodes, etc. Alternatively, these parameters can be used to indicate when such treatment should be employed.

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Because the biological agents of the present invention bind to living prostate cells, therapeutic methods for treating prostate cancer using these biological agents are much more effective than those which target lysed prostate cells. For the same reasons, diagnostic and imaging methods which determine the location of living normal, benign hyperplastic, or cancerous prostate epithelial cells (as well as vascular endothelial cells within cancers) are much improved by employing the biological agents of the present invention. In addition, the ability to differentiate between living and dead prostate cells can be advantageous, especially to monitor the effectiveness of a particular treatment regimen.

Hybridomas E99, J415, J533, and J591 have been deposited pursuant to, and in satisfaction of, the requirements of the Budapest Treaty on the International Recognition of the Deposit of Microorganisms for the Purposes of Patent Procedure with the American Type Culture Collection ("A.T.C.C.") at 12301 Parklawn Drive, Rockville, Maryland 20852. Hybridoma E99 was deposited on May 2, 1996, and received A.T.C.C. Designation Number HB-12101. Hybridoma J415 was deposited on May 30, 1996, and received A.T.C.C. Designation Number HB-12109. Hybridomas J533 and J591 were deposited on June 6, 1996, and received A.T.C.C. Designation Numbers HB-12127 and HB-12126, respectively.

The present invention is further illustrated by the following examples.

EXAMPLES

Example 1 -- Human Tissues

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Fresh specimens of benign and malignant tissues were obtained from the Department of Pathology of New York Hospital Cornell University Medical Center ("NYH-CUMC"),

Example 2 -- Tissue Culture

Cultured cell lines of human cancers were 10 obtained from the Laboratory of Urological Oncology of NYH-CUMC. The prostate cancer cell lines PC-3 (Mickey, D.D., et al., "Characterization Of A Human Prostate Adenocarcinoma Cell Line (DU145) As A Monolayer Culture 15 And As A Solid Tumor In Athymic Mice, " Prog. Clin. Biol. Res., 37:67-84 (1980), which is hereby incorporated by reference), DU-145 (Mickey, D.D., et al., "Characterization Of A Human Prostate Adenocarcinoma Cell Line (DU145) As A Monolayer Culture And As A Solid Tumor In Athymic Mice, " Prog. Clin. Biol. Res., 37:67-84 20 (1980), which is hereby incorporated by reference), and LNCaP (Horoszewicz, J.S., et al., "LNCaP Model Of Human Prostatic Carcinoma, " Cancer Res., 43:1809-1818 (1983), which is hereby incorporated by reference) were obtained 25 from the American Type Culture Collection (Rockville, MD.). Hybridomas were initially cloned in RPMI-1640 medium supplemented with 10% FCS, 0.1 mM nonessential amino acids, 2mM L-glutamine, 100 units/ml of penicillin, 100 ug/ml of streptomycin and HAT medium (GIBCO, Grand 30 Island, NY). Subclones were cultured in the same medium without aminopterin.

Example 3 -- Preparation of Mouse Monoclonal Antibodies Female BALB/c mice were immunized

intraperitoneally with LNCaP (6x10⁶ cells) three times at week intervals. A final intraperitoneal booster immunization was administered with fresh prostate

epithelial cells which had been grown in vitro. Three days later, spleen cells were fused with SP-2 mouse myeloma cells utilizing standard techniques (Ueda, R., et al., "Cell Surface Antigens Of Human Renal Cancer Defined By Mouse Monoclonal Antibodies: Identification Of 5 Tissue-Specific Kidney Glycoproteins, " Proc. Natl. Acad. Sci. USA, 78:5122-5126 (1981), which is hereby incorporated by reference). Supernatants of the resulting clones were screened by rosette and complement 10 cytotoxicity assays against viable LNCaP. Clones which were positive by these assays were screened by immunochemistry vs normal kidney, colon, and prostate. Clones which were LNCap*/NmlKid*/colon*/prostate* were selected and subcloned 3 times by limiting dilution. 15 immunoglobulin class of cultured supernatant from each clone was determined by immunodiffusion using specified rabbit antisera (Calbiochem, San Diego, CA). purified using the MAPS-II kit (Bio-Rad, Richmond, CA).

20 Example 4 -- Biotinylation of mAbs

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Purified mAbs were dialyzed in 0.1 M NaHCO $_3$ for 2 hours. One ml of mAb at 1 mg/ml was mixed with 0.1 ml of biotinamidocaproate N-hydroxysuccinamide ester (Sigma) in dimethylsulfoxide (1 mg/ml) and stirred for 4 hours at room temperature. Unbound biotin was removed by dialysis against phosphate buffered saline ("PBS").

Example 5 -- Immunohistochemical Staining of Prostate Tissues

20 Cryostat sections of prostate tissues were placed inside rings of Falcon 3034 plate covers (Becton-Dickenson, Lincoln Park, NJ) previously coated with 0.45% gelatin solution as described in Marusich, M.F., "A Rapid Method For Processing Very Large Numbers Of Tissue

35 Sections For Immunohistochemical Hybridoma Screening," J. Immunol. Methods, 111:143-145 (1988), which is hereby incorporated by reference. Plates were stored at -80°C.

Cryostat sections were fixed with 2% paraformaldehyde in PBS for 10 min at room temperature, and, after washing with PBS, endogenous peroxidase activity was blocked by treatment with 0.3% hydrogen peroxide in PBS for 10 min at room temperature. After sections were incubated with 2% BSA in PBS for 20 min, mAbs were added for 60 min at room temperature. Slides were extensively washed with PBS and incubated with peroxidase-conjugated rabbit antimouse Ig (DAKO Corp., Santa Barbara, CA) diluted 1:100 in 10% normal human serum in PBS for 60 min at room temperature. After a diaminobenzidine reaction, sections were counterstained with hematoxylin.

Example 6 -- Serological Analysis

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The anti-mouse immunoglobulin mixed 15 hemadsorption assay was performed as described in Ueda, R., et al., "Cell Surface Antigens Of Human Renal Cancer Defined By Mouse Monoclonal Antibodies: Identification Of Tissue-Specific Kidney Glycoproteins," Proc. Natl. Acad. Sci. USA, 78:5122-5126 (1981), which is hereby 20 incorporated by reference. To prepare the indicator cells, anti-mouse Ig (DAKO Corp.) was conjugated to type O human RBC using 0.01% chromium chloride. Serological assays were performed on cells previously 25 plated in Terasaki plates (Nunc, Denmark). Antibodies were incubated with target cells at room temperature for 1 hour. Target cells were then washed, and indicator cells added for 1 hour.

30 Example 7 -- Immunoprecipitation

LNCaP cells (2 x 10⁷) were biotinylated with biotin-NHSS (at final concentration of 5mM) for 30 minutes on ice. After washing, the biotinylated cells were resuspended in 1 ml lysis buffer (20mM Tris/HCl pH 8.0, 1mM EDTA, 1mM PMSF, 1% triton X-100) for 30 min on ice. The suspension was centrifuged at 1500g x 100 min at 4°C, and the supernatant was centrifuged at 12,000 rpm

x 15 min at 4°C. The resulting lysate was preabsorbed with rabbit or goat anti-mouse IgG-coated pansorbin for 1 hour at 4°C. The pre-absorbed lysate was incubated with the mAb overnight at 4°C. Rabbit or goat anti-mouse Igcoated agarose beads were added for 2 hours at 4°C and then washed. The beads were resuspended in Trisbase/NaCl, added to sample buffer with 2-mercaptoethanol, and boiled for 5 min. After centrifuging, the supernatant was run on an SDS-PAGE 12% gel. transferred to a nitrocellulose membrane which was blocked and stained with straptavidin-peroxidase. membrane was developed with diaminobenzidine ("DAB").

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Sequential immunoprecipitation was similar except that the lysate was initially pre-cleared with one mAb overnight at 4°C. A second mAb was then used to immunoprecipitate the pre-cleared lysate.

Approximately 2000 clones were screened, of which four clones were selected as described in Example 3, above. After subcloning, supernatants from the 4 hybridomas, E99, J415, J533, and J591, were assayed by immunofluorescence against viable (i.e. unfixed) LNCaP, immunoprecipitation, and sequential immunoprecipitation to confirm reactivity to PSMA.

The immunofluorescence study using the LNCaP target cell (described originally in Horoszewicz, which is hereby incorporated by reference, to make the 7E11 antibody and the prototype cell line for expression for PSMA) shows that E99 antibody binds to and renders viable LNCaP cells immunofluorescent. This is in contrast to the 7E11 antibody, which, as noted originally in Horoszewicz, which is hereby incorporated by reference, gives only poor or no binding to viable LNCaP cells but exhibits strong binding once the cells are fixed (killed).

35 The reactivities of the four mAbs with normal human tissues were examined immunohistochemically; these results are presented in Table 3.

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TABLE 3

Reactivity of mAbs with human normal tissues by indirect immunoperosidase staining

- 1	00	T415	TE 2.2	75.04
	99 γ ₃)	J415 (γ ₁)	J533 (γ ₁)	J591 (γ ₁)
				-
Prostate* Kidney	•	•	•	•
Glomerulus	0	0	0	. 0
Prox. Tubule	•	•	Ě	Ě
Ureter	0	0	0	0
Bladder	0	0	0	0
Testis	0	0	0	0
Uterus	0			
Esophagus	0	0	0	0
Small Intestine	0	0	0	0
Stomach	0	0	0	0
Colon	0	0	0	0
Spleen	0	0	0	0
Thyroid	0	0	0	0
Lung	0	0	0	0
Pancreas	0	0	0	0
Liver	0	0	0	0
* BPH	0-3+	0-3*	0-4+	0-4
* Prostate Cancer		0-3+	0-4*	0-4
* LNCaP (scid)	3⁺	3*	4+	4+
* LuCaP (scid)	0-2*	0-2*	0-3+	0-3

• - positive; • - weak, heterogeneous; o - negative

The above sequential immunoprecipitaion study showed that 7E11, E99, J415, J533, and J591 bind to the same molecule, i.e. PSMA.

Example 8 -- Western Blot Analysis

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To confirm that antibodies E99, J415, J533, and J591 precipitate an identical band to the 7E11 antibody (i.e., PSMA), Western Blot analyses were performed. Seminal plasma (400 μg/lane) or LNCaP lysate were loaded into lanes of 12% SDS-PAGE gels. After electrophoresis, the gels are transferred to nitrocellulose membranes. The membranes were blocked with 5% dry milk/Tris-buffered saline-tween 20 ("TBST") for 60 min at room temperature. After washing, the membranes were incubated with primary mAb for 60 min at room temperature. After repeat

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washing, the membranes were incubated with sheep antimouse-Ig-peroxidase 1/5000 in 5% dry milk/TBST for 60 min at room temperature. After repeat washing, the membranes were developed using a chemiluminescent tag designated "ECL" (Amersham Life Sciences, International, Arlington Heights, Illinois) according to the manufacturer's directions. The results of the Western Blot experiment are presented in Table 4.

10 TABLE 4
Western blot data

served as a positive control.

	Sample	7E11	E99	J415	J533	J591
	Prostatic	100 KD				
15	(seminal)	band	band	band	band	band
	fluid					
	LNCaP	100 KD &				
	cell lysate	200 KD				
		bands	bands	bands	bands	bands

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To confirm cell surface (external) expression of the detected PSMA, fresh, viable LNCaP cells were tested, without fixation, in vitro, by immunofluorescence. LNCaP cells were washed and incubated with mAb for 1 hour at room temperature and then with a rabbit anti-mouse Ig-fluorescein (DAKO Corp., Santa Barbara, CA). Wells were read with a fluorescent microscope. Negative control consisted of an isotypematched irrelevant mAb, while an anti-class I MHC mAb

Example 9 -- mAb Reactivity to External Domain of PSMA

Immunofluorescence and rosette assay results are presented in Table 5.

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TABLE 5

Comparison of 7E11 with new mAbs

5	LNCaP viable cells	7E11	E99	J415	J533	J591
10	Immunofluor- escence	neg	3+	3+	4+	4+
	Rosette assay	neg	+	+	+	+
	LNCaP-fixed	+++	++++	+++	++	+++

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Example 10 -- Competition Studies

A competition study was carried out to determine whether J591, J533, E99, and J415 detected the same or different antigenic sites (epitopes) of the prostate specific membrane antigen molecule using the following procedure.

Plates were coated with LNCaP cell line lysate as a source of prostate specific membrane antiqen and 25 washed to remove unbound material. "Cold" (unlabeled) monoclonal antibody was incubated on the plate for 1 hour at room temperature to allow binding to its antigenic Subsequently, a second monoclonal antibody, labeled either with biotin or 125I, was added for an additional hour. Plates were washed to remove unbound 30 material. The amount of the second monoclonal antibody bound to the prostate specific membrane antigen-coated plate was determined either by avidin-alkaline phosphatase in an enzyme-linked immunoassay (in the case 35 of biotin-labeled second monoclonal antibody) or by physically counting the well in a gamma counter (in the case of 125I-labeled second monoclonal antibody). Controls consisted of using the same monoclonal antibody both cold and labeled to define "100% competition" or 40 using monoclonal antibody to a totally different molecule (e.g., monoclonal antibody I-56, which detects inhibin, a

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prostate related protein different from prostate specific membrane antigen) to define "0% competition".

The results indicated that J591, J533, and E99 each interfere, compete, or block binding of one another but do not block binding of J415 and vice versa.

7E11/CYT356, known to bind PSMA at a different (intracellular) site, did not block any of J591, J533, E99, or J415.

Having pairs of monoclonal antibodies which

bind to non-competing sites permits development of
antibody sandwich assays for detecting soluble antigens,
such as solubilized prostate specific membrane antigen or
fragment thereof, in, for example, body fluids. For
example, the antigen (e.g., prostate specific membrane
antigen or a fragment thereof) could be "captured" from
body fluid with J591 and, in another step, detected by
labeled J415.

In another setting, e.g. treatment, one could increase antibody binding by using a combination of noncompeting monoclonal antibodies. For example, assuming 20 the non-competing sites are each represented once on the prostate specific membrane antigen molecule, adding a combination of J591 plus J415 would bind twice as many monoclonal antibody molecules as either monoclonal 25 antibody alone. Binding two non-competing antigenic binding sites also can result in greater antigen crosslinking and, perhaps, increased internalization. Furthermore, since the two detected sites are physically located on the same prostate specific membrane antigen 30 molecule, the binding of two monoclonal antibody molecules to that single prostate specific membrane antigen molecule puts the two monoclonal antibody molecules in close proximity to each other, a setting which provides optimal drug-prodrug interaction. 35 example, monoclonal antibody J591 can be conjugated with an inactive pro-drug and J415 can be conjugated with a pro-drug activator. Since prodrug and activator would be

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bound in close proximity only at the site of prostate specific membrane antigen-expressing cells (e.g., prostate cancer cells), prodrug activation to the active form would occur only at those sites.

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Example 11 -- Microscopy

Confocal microscopy and immuno-electron microscopy demonstrated that E99, J591, J533, and J415 are bound to the cell membrane at clathrin-coated pits and then rapidly internalize into endosomes (cytoplasmic vesicles). Figures 1-4 are immuno-electron micrographs which follow the interaction of gold-labeled monoclonal antibody J591 with the cell surface as a function of time. In these figures, the location of the monoclonal antibody is indicated by the black dots.

Viable LNCaP cells were incubated with J591 for one hour at 4°C. The cells were washed and then held at 37°C for 0, 5, 10, or 15 minutes, after which time they were fixed and processed for immuno-electron microscopy. Figure 1 shows the cell prior to 37°C incubation. can be seen bound to the cell along the external aspect of the cell membrane. In this Figure, "M" denotes the cell's mitochondria, and "N" denotes its nucleus. 2 shows the cell after incubation at 37°C for 5 minutes. The arrow indicates formation of a clathrin-coated pit. In Figure 3, which shows the cell after a 10 minute 37°C incubation, pinching off or endocytosis of the clathrincoated pit can be seen, as indicated by the arrow. Figure 4 shows that, after incubation at 37°C for 15 minutes, monoclonal antibody J591 is contained in endocytic vesicles within the cell, as indicated by the arrows. As can be seen in Figure 5, after incubation at 37°C for 15 minutes, monoclonal antibody J591 is also contained within endosomes, as indicated by the arrows.

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Example 12 -- Sequencing of the Variable Region of Monoclonal Antibody J591

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Total RNA was prepared from 10⁷ murine hybridoma J591 cells. A sample of the conditioned medium from these cells was tested for binding to the specific antigen for J591 on prostate cells. The conditioned medium was positive by both ELISA and Western Blot for binding to the antigen.

VH and VK cDNA were prepared using reverse transcriptase and mouse κ constant region and mouse IgG constant region primers. The first strand cDNAs were amplified by PCR using a variety of mouse signal sequence primers (6 for VH and 7 for VK). The amplified DNAs were gel-purified and cloned into the vector pT7Blue.

The VH and VK clones obtained were screened for correct inserts by PCR, and the DNA sequence of selected clones was determined by the dideoxy chain termination method.

20 Excluding the primer region (as the sequence of this depended on the sequence of the primer that was used), all the VH clones obtained gave identical sequence. This sequence was obtained from clones produced with three different 5' primers. One clone had 25 one base pair change within the signal sequence, and one clone contained an aberrant PCR product. Using the sequencing strategy shown in Figure 6, the nucleotide sequence for the heavy chain was obtained. designated SEQ. ID. No. 1 and is presented in Figure 7, along with the nucleotide sequence of the corresponding 30 reverse, non-coding strand (designated SEQ. ID. No. 2). These sequences include part of the signal sequence and part of the constant region of the antibody. corresponding deduced amino acid sequences of J591 VH, 35 designated SEQ. ID. No. 3, SEQ. ID. No. 4, and SEQ. ID. No. 5, are also shown in Figure 7. The coding strand of the J591 heavy chain's variable region (exclusive of signal sequence and constant region components) has the

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following nucleotide sequence (designated SEQ. ID. No. 6):

GAGGTCCAGCTGCAACAGTCTGGACCTGAACTGGTGAAGCCTGGGACTTCAGTGAGG
ATATCCTGCAAGACTTCTGGATACACATTCACTGAATATACCATACACTGGGTGAAG
CAGAGCCATGGAAAGAGCCTTGAGTGGATTGGAAACATCCAATCCTAACAATGGTGGT
ACCACCTACAATCAGAAGTTCGAGGACAAGGCCACATTGACTGTAGACAAGTCCTCC
AGTACAGCCTACATGGAGCTCCGCAGCCTAACATCTGAGGATTCTGCAGTCTATTAT
TGTGCAGCTGGTTGGAACTTTGACTACTGGGGCCCAAGGCACCACTCTCACAGTCTCC
TCA

The reverse, non-coding strand of the J591 heavy chain's variable region (exclusive of signal sequence and constant region components) has the following nucleotide sequence (designated SEQ. ID. No. 7):

TGAGGAGACTGTGAGAGTGGTGCCTTGGCCCCAGTAGTCAAAGTTCCAACCAGCTGC
ACAATAATAGACTGCAGAATCCTCAGATGTTAGGCTGCGGAGCTCCATGTAGGCTGT
ACTGGAGGACTTGTCTACAGTCAATGTGGCCTTGTCCTCGAACTTCTGATTGTAGGT

20 GGTACCACCATTGTTAGGATTGATGTTTCCAATCCACTCAAGGCTCTTTCCATGGCT
CTGCTTCACCCAGTGTATGGTATATTCAGTGAATGTGTATCCAGAAGTCTTGCAGGA
TATCCTCACTGAAGTCCCAGGCTTCACCAGTTCAGGTCCAGACTGTTGCAGGAC

- The protein sequence corresponding to the J591 heavy chain's variable region (exclusive of signal sequence and constant region components) has the following nucleotide sequence (designated SEQ. ID. No. 8):
- 30 EVQLQQSGPELVKPGTSVRISCKTSGYTFTEYTIHWVKQSHGKSLEWIGNINPNNGG TTYNQKFEDKATLTVDKSSSTAYMELRSLTSEDSAVYYCAAGWNFDYWGQGTTLTVS S

The J591 VH is in Mouse Heavy Chains Subgroup

35 IIA (Kabat et al., <u>Sequences of Proteins of Immunological</u>

<u>Interest</u>, U.S. Department of Health and Human Services

(1991) ("Kabat"), which is hereby incorporated by

reference). The sequence of J591 VH is compared to the consensus sequence for this subgroup in Figure 8.

In contrast to the VH, more than one VK sequence was obtained. Out of the 15 VK clones examined, 5 four gave the sequence of an aberrant mouse $Ig\kappa$ from the fusion partner (Carol et al., Molecular Immunology, 25:991-995 (1988), which is hereby incorporated by These clones originated from two specific 5' primers. No further work was done with these clones. 10 the remaining clones, ten gave identical nucleotide sequences, and one clone, VK17, gave an alternative VK sequence. The ten identical clones originated from three 5' primers (different from the two that gave the aberrant sequence), one of which also produced VK17. 15 sequencing strategy that was employed is shown in Figure 9.

The nucleic acid sequence of J591 VK corresponding to the ten identical clones (designated SEQ. ID. No. 9) is presented in Figure 10, along with the nucleic acid sequence of the corresponding reverse, noncoding strand (designated SEQ. ID. No. 10) and the deduced amino acid sequences, which are designated SEQ. ID. No. 11, SEQ. ID. No. 12, and SEQ. ID. No. 13. These sequences include part of the signal sequence and part of the constant region of the antibody. The coding strand of the J591 light (kappa) chain's variable region (exclusive of signal sequence and constant region components) corresponding to the ten identical clones has the following nucleotide sequence (designated SEQ. ID. No. 14):

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AACATTGTAATGACCCAATCTCCCAAATCCATGTCCATGTCAGTAGGAGAGAGGGTC
ACCTTGACCTGCAAGGCCAGTGAGAATGTGGTTACTTATGTTTCCTGGTATCAACAG
AAACCAGAGCAGTCTCCTAAACTGCTGATATACGGGGCATCCAACCGGTACACTGGG
GTCCCCGATCGCTTCACAGGCAGTGGATCTGCAACAGATTTCACTCTGACCATCAGC
ÄGTGTGCAGGCTGAAGACCTTGCAGATTATCACTGTGGACAGGGTTACAGCTATCCG
TACACGTTCGGAGGGGGGACCAAGCTGGAAATAAAA

The reverse, non-coding strand of the J591 light (kappa) chain's variable region (exclusive of signal sequence and constant region components) corresponding to the ten identical clones has the following nucleotide sequence (designated SEQ. ID. No. 15):

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TTTTATTTCCAGCTTGGTCCCCCCCCCGAACGTGTACGGATAGCTGTAACCCTGTCC
ACAGTGATAATCTGCAAGGTCTTCAGCCTGCACACTGCTGATGGTCAGAGTGAAATC
TGTTGCAGATCCACTGCCTGTGAAGCGATCGGGGACCCCAGTGTACCGGTTGGATGC
CCCGTATATCAGCAGTTTAGGAGACTGCTCTGGTTTCTGTTGATACCAGGAAACATA
AGTAACCACATTCTCACTGGCCTTGCAGGTCAAGGTGACCCTCTCTCCTACTGACAT
GGACATGGATTTGGGAGATTGGGTCATTACAATGTT

The protein sequence corresponding to the J591 light

(kappa) chain's variable region (exclusive of signal sequence and constant region components) corresponding to the ten identical clones has the following nucleotide sequence (designated SEQ. ID. No. 16):

20 NIVMTQSPKSMSMSVGERVTLTCKASENVVTYVSWYQQKPEQSPKLLIYGASNRYTG VPDRFTGSGSATDFTLTISSVQAEDLADYHCGQGYSYPYTFGGGTKLEIK

The coding strand of the J591 light (kappa) chain's variable region (exclusive of signal sequence and constant region components) corresponding to clone VK17 has the following nucleotide sequence (designated SEQ. ID. No. 17):

GACATTGTGATGACCCAGTCTCACAAATTCATGTCCACATCAGTAGGAGACAGGGTC

30 AGCATCATCTGTAAGGCCAGTCAAGATGTGGGTACTGCTGTAGACTGGTATCAACAG

AAACCAGGACAATCTCCTAAACTACTGATTTATTGGGCATCCACTCGGCACACTGGA

GTCCCTGATCGCTTCACAGGCAGTGGATCTGGGACAGACTTCACTCTCACCATTACT

AATGTTCAGTCTGAAGACTTGGCAGATTATTTCTGTCAGCAATATAACAGCTATCCT

CTCACGTTCGGTGCTGGGACCATGCTGGACCTGAAA

The reverse, non-coding strand of the J591 light (kappa) chain's variable region (exclusive of signal sequence and

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constant region components) corresponding to clone VK17 has the following nucleotide sequence (designated SEQ. ID. No. 18):

5 TTTCAGGTCCAGCATGGTCCCAGCACCGAACGTGAGAGGATAGCTGTTATATTGCTG
ACAGAAATAATCTGCCAAGTCTTCAGACTGAACATTAGTAATGGTGAGAGTGAAGTC
TGTCCCAGATCCACTGCCTGTGAAGCGATCAGGGACTCCAGTGTGCCGAGTGGATGC
CCAATAAATCAGTAGTTTAGGAGATTGTCCTGGTTTCTGTTGATACCAGTCTACAGC
AGTACCCACATCTTGACTGGCCTTACAGATGATGCTGACCCTGTCTCCTACTGATGT
10 GGACATGAATTTGTGAGACTGGGTCATCACAATGTC

The protein sequence corresponding to the J591 light (kappa) chain's variable region (exclusive of signal sequence and constant region components) corresponding to clone VK17 has the following nucleotide sequence (designated SEQ. ID. No. 19):

DIVMTQSHKFMSTSVGDRVSIICKASQDVGTAVDWYQQKPGQSPKLLIYWASTRHTG VPDRFTGSGSGTDFTLTITNVQSEDLADYFCQQYNSYPLTFGAGTMLDLK

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J591 VK is in the Mouse Kappa Chains Subgroup V (Kabat, which is hereby incorporated by reference). The sequence of J591 VK corresponding to the ten identical clones is compared to the consensus sequence for the subgroup in Figure 11.

Preferred J591's are those having heavy chain variable region DNA coding strand sequences corresponding to SEQ. ID. No. 6 and non-coding strand (reverse) sequences corresponding to SEQ. ID. No. 7. The heavy chain variable region of J591 preferably has an amino acid sequence corresponding to SEQ. ID. No. 8. The light chain variable region of J591 preferably has a DNA coding strand sequence corresponding to SEQ. ID. No. 17, a DNA non-coding strand (reverse) sequence corresponding to SEQ. ID. No. 18, and a amino acid sequence corresponding to SEQ. ID. No. 19.

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Example 13 -- Immunohistochemical Staining of Normal and Cancer Tissues

Cancer tissues from 23 carcinomas were precooled in liquid nitrogen, snap-frozen in OCT compound 5 (Miles, Elkhart, Indiana) on dry ice, and stored at -80°C. Cryostat tissue sections (5 μ m) were fixed in cold acetone (4°C) for 10 minutes. mAbs (5 μ g/ml or hybridoma supernatants) were incubated for 1 hour at room 10 temperature. Antibody binding was detected using rabbit anti-mouse Ig-peroxidase (Dako, Carpinteria, California) as a secondary antibody and DAB (Sigma, St. Louis, Missouri) as chromogen. Isotype-matched irrelevant antibody was used as negative control.

mAbs J591, J533, J415, and E99 reacted strongly . 15 with vascular endothelia in all 23 carcinomas studied, including 9/9 renal, 5/5 urothelial, 6/6 colon, 1/1 lung, and 1/1 breast carcinomas, and 1/1 metastatic adenocarcinoma to the liver. Figures 2A-2F, 20 respectively, show the immunohistochemical reactivity of mAb J591 to neovasculature of renal, urothelial, colon, lung, and breast carcinomas, and metastatic

25 Although the invention has been described in detail for the purpose of illustration, it is understood that such detail is solely for that purpose and variations can be made by those skilled in the art without departing from the spirit and scope of the 30 invention which is defined by the following claims.

adenocarcinoma to the liver.

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SEQUENCE LISTING

- (1) GENERAL INFORMATION:
 - (i) APPLICANT: Cornell Research Foundation, Inc.
 - (ii) TITLE OF INVENTION: TREATMENT AND DIAGNOSIS OF CANCER
 - (iii) NUMBER OF SEQUENCES: 19
 - (iv) CORRESPONDENCE ADDRESS:
 - (A) ADDRESSEE: Nixon, Hargrave, Devans & Doyle LLP
 - (B) STREET: Clinton Square, P.O. Box 1051
 - (C) CITY: Rochester
 - (D) STATE: New York
 - (E) COUNTRY: U.S.A.
 - (F) ZIP: 14603-1051
 - (v) COMPUTER READABLE FORM:
 - (A) MEDIUM TYPE: Floppy disk
 - (B) COMPUTER: IBM PC compatible
 - (C) OPERATING SYSTEM: PC-DOS/MS-DOS
 - (D) SOFTWARE: PatentIn Release #1.0, Version #1.30
 - (vi) CURRENT APPLICATION DATA:
 - (A) APPLICATION NUMBER:
 - (B) FILING DATE:
 - (C) CLASSIFICATION:
 - (vii) PRIOR APPLICATION DATA:
 - (A) APPLICATION NUMBER: US 06/022,125
 - (B) FILING DATE: 18-JUL-1996
 - (vii) PRIOR APPLICATION DATA:
 - (A) APPLICATION NUMBER: US 08/838,632
 - (B) FILING DATE: 09-APR-1997
 - (viii) ATTORNEY/AGENT INFORMATION:
 - (A) NAME: Goldman, Michael L.
 - (B) REGISTRATION NUMBER: 30,727
 - (C) REFERENCE/DOCKET NUMBER: 19603/1174
 - (ix) TELECOMMUNICATION INFORMATION:
 - (A) TELEPHONE: (716) 263-1304
 - (B) TELEFAX: (716) 263-1600
- (2) INFORMATION FOR SEQ ID NO:1:
 - (i) SEQUENCE CHARACTERISTICS:

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(B) (C)	LENGTH: 391 base pairs TYPE: nucleic acid STRANDEDNESS: single TOPOLOGY: linear

(ii) MOLECULE TYPE: cDNA

(xi) SEQUENCE DESCRIPTION: SEQ ID NO:1:

TCTCCTGTCA	GGAACTGCAG	GTGTCCTCTC	TGAGGTCCAG	CTGCAACAGT	CTGGACCTGA	60
ACTGGTGAAG	CCTGGGACTT	CAGTGAGGAT	ATCCTGCAAG	ACTTCTGGAT	ACACATTCAC	120
TGAATATACC	ATACACTGGG	TGAAGCAGAG	CCATGGAAAG	AGCCTTGAGT	GGATTGGAAA	180
CATCAATCCT	AACAATGGTG	GTACCACCTA	CAATCAGAAG	TTCGAGGACA	AGGCCACATT	240
GACTGTAGAC	AAGTCCTCCA	GTACAGCCTA	CATGGAGCTC	CGCAGCCTAA	CATCTGAGGA	300
TTCTGCAGTC	TATTATTGTG	CAGCTGGTTG	GAACTTTGAC	TACTGGGGCC	AAGGCACCAC	360
TCTCACAGTC	TCCTCAGCCA	AAACGACACC	C			391

(2) INFORMATION FOR SEQ ID NO:2:

(i) SEQUENCE CHARACTERISTICS:

- (A) LENGTH: 391 base pairs
- (B) TYPE: nucleic acid
- (C) STRANDEDNESS: single
- (D) TOPOLOGY: linear

(ii) MOLECULE TYPE: cDNA

(xi) SEQUENCE DESCRIPTION: SEQ ID NO:2:

GGGTGTCGTT	TTGGCTGAGG	AGACTGTGAG	AGTGGTGCCT	TGGCCCCAGT	AGTCAAAGTT	60
CCAACCAGCT	GCACAATAAT	AGACTGCAGA	ATCCTCAGAT	GTTAGGCTGC	GGAGCTCCAT	120
GTAGGCTGTA	CTGGAGGACT	TGTCTACAGT	CAATGTGGCC	TTGTCCTCGA	ACTTCTGATT	180
GTAGGTGGTA	CCACCATTGT	TAGGATTGAT	GTTTCCAATC	CACTCAAGGC	TCTTTCCATG	240
GCTCTGCTTC	ACCCAGTGTA	TGGTATATTC	AGTGAATGTG	TATCCAGAAG	TCTTGCAGGA	300
TATCCTCACT	GAAGTCCCAG	GCTTCACCAG	TTCAGGTCCA	GACTGTTGCA	GCTGGACCTC	360
AGAGAGGACA	CCTGCAGTTC	CTAGCAGGAG	A			391

(2) INFORMATION FOR SEQ ID NO:3:

- (i) SEQUENCE CHARACTERISTICS:
 - (A) LENGTH: 123 amino acids
 - (B) TYPE: amino acid
 - (C) STRANDEDNESS:
 - (D) TOPOLOGY: linear

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(ii) MOLECULE TYPE: protein

(xi) SEQUENCE DESCRIPTION: SEQ ID NO:3:

Ser Pro Val Arg Asn Cys Arg Cys Pro Leu Gly Pro Ala Ala Thr Val 1 5 10 15

Trp Thr Thr Gly Glu Ala Trp Asp Phe Ser Glu Asp Ile Leu Gln Asp 20 25 30

Phe Trp Ile His Ile His Ile Tyr His Thr Leu Gly Glu Ala Glu Pro
35 40 45

Trp Lys Glu Pro Val Asp Trp Lys His Gln Ser Gln Trp Trp Tyr His 50 55 60

Leu Gln Ser Glu Val Arg Gly Gln Gly His Ile Asp Cys Arg Gln Val 65 70 75 80

Leu Gln Tyr Ser Leu His Gly Ala Pro Gln Pro Asn Ile Gly Phe Cys
85 90 95

Ser Leu Leu Cys Ser Trp Leu Glu Leu Leu Gly Pro Arg His 100 105 110

His Ser His Ser Leu Leu Ser Gln Asn Asp Thr 115 120

(2) INFORMATION FOR SEQ ID NO:4:

- (i) SEQUENCE CHARACTERISTICS:
 - (A) LENGTH: 130 amino acids
 - (B) TYPE: amino acid
 - (C) STRANDEDNESS:
 - (D) TOPOLOGY: linear

(ii) MOLECULE TYPE: protein

(xi) SEQUENCE DESCRIPTION: SEQ ID NO:4:

Leu Leu Ser Gly Thr Ala Gly Val Leu Ser Glu Val Gln Leu Gln Gln 1 5 10 15

Ser Gly Pro Glu Leu Val Lys Pro Gly Thr Ser Val Arg Ile Ser Cys
20 25 30

Lys Thr Ser Gly Tyr Thr Phe Thr Glu Tyr Thr Ile His Trp Val Lys
35 40 45

Gln Ser His Gly Lys Ser Leu Glu Trp Ile Gly Asn Ile Asn Pro Asn 50 55 60

Asn Gly Gly Thr Thr Tyr Asn Gln Lys Phe Glu Asp Lys Ala Thr Leu 65 70 75 80

Thr Val Asp Lys Ser Ser Ser Thr Ala Tyr Met Glu Leu Arg Ser Leu 85 90 95

Thr Ser Glu Asp Ser Ala Val Tyr Tyr Cys Ala Ala Gly Trp Asn Phe
100 105 110

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Asp Tyr Trp Gly Gln Gly Thr Thr Leu Thr Val Ser Ser Ala Lys Thr 115 120 125

Thr Pro

- (2) INFORMATION FOR SEQ ID NO:5:
 - (i) SEQUENCE CHARACTERISTICS:
 - (A) LENGTH: 125 amino acids
 - (B) TYPE: amino acid
 - (C) STRANDEDNESS:
 - (D) TOPOLOGY: linear
 - (ii) MOLECULE TYPE: protein
 - (xi) SEQUENCE DESCRIPTION: SEQ ID NO:5:

Leu Ser Cys Gln Glu Leu Gln Val Ser Ser Leu Arg Ser Ser Cys Asn
1 5 10 15

Ser Leu Asp Leu Asn Trp Ser Leu Gly Leu Gln Gly Tyr Pro Ala Arg
20 25 30

Leu Leu Asp Thr His Ser Leu Asn Ile Pro Tyr Thr Gly Ser Arg Ala 35 40 45

Met Glu Arg Ala Leu Ser Gly Leu Glu Thr Ser Ile Leu Thr Met Val
50 60

Val Pro Pro Thr Ile Arg Ser Ser Arg Thr Arg Pro His Leu Thr Ser 65 70 75 80

Pro Pro Val Gln Pro Thr Trp Ser Ser Ala Ala His Leu Arg Ile Leu 85 90 95

Gln Ser Ile Ile Val Gln Leu Val Gly Thr Leu Thr Thr Gly Ala Lys
100 105 110

Ala Pro Leu Ser Gln Pro Ser Gln Pro Lys Arg His Pro 115 120 125

- (2) INFORMATION FOR SEQ ID NO:6:
 - (i) SEQUENCE CHARACTERISTICS:
 - (A) LENGTH: 345 base pairs
 - (B) TYPE: nucleic acid
 - (C) STRANDEDNESS: single
 - (D) TOPOLOGY: linear
 - (ii) MOLECULE TYPE: cDNA
 - (xi) SEQUENCE DESCRIPTION: SEQ ID NO:6:

GAGGTCCAGC TGCAACAGTC TGGACCTGAA CTGGTGAAGC CTGGGACTTC AGTGAGGATA

60

120

TCCTGCAAGA CTTCTGGATA CACATTCACT GAATATACCA TACACTGGGT GAAGCAGAGC

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CATGGAAAGA GCCTTGAGTG GATTGGAAAC ATCAATCCTA ACAATGGTGG TACCACCTAC	180
AATCAGAAGT TCGAGGACAA GGCCACATTG ACTGTAGACA AGTCCTCCAG TACAGCCTAC	240
ATGGAGCTCC GCAGCCTAAC ATCTGAGGAT TCTGCAGTCT ATTATTGTGC AGCTGGTTGG	300
AACTTTGACT ACTGGGGCCA AGGCACCACT CTCACAGTCT CCTCA	345
(2) INFORMATION FOR SEQ ID NO:7:	
 (i) SEQUENCE CHARACTERISTICS: (A) LENGTH: 345 base pairs (B) TYPE: nucleic acid (C) STRANDEDNESS: single (D) TOPOLOGY: linear 	
(ii) MOLECULE TYPE: cDNA	
(xi) SEQUENCE DESCRIPTION: SEQ ID NO:7:	
TGAGGAGACT GTGAGAGTGG TGCCTTGGCC CCAGTAGTCA AAGTTCCAAC CAGCTGCACA	60
ATAATAGACT GCAGAATCCT CAGATGTTAG GCTGCGGAGC TCCATGTAGG CTGTACTGGA	120
GGACTTGTCT ACAGTCAATG TGGCCTTGTC CTCGAACTTC TGATTGTAGG TGGTACCACC	180
ATTGTTAGGA TTGATGTTTC CAATCCACTC AAGGCTCTTT CCATGGCTCT GCTTCACCCA	240
GTGTATGGTA TATTCAGTGA ATGTGTATCC AGAAGTCTTG CAGGATATCC TCACTGAAGT	300
CCCAGGCTTC ACCAGTTCAG GTCCAGACTG TTGCAGCTGG ACCTC	345
(2) INFORMATION FOR SEQ ID NO:8:	
 (i) SEQUENCE CHARACTERISTICS: (A) LENGTH: 115 amino acids (B) TYPE: amino acid (C) STRANDEDNESS: (D) TOPOLOGY: linear 	
(ii) MOLECULE TYPE: protein	
(xi) SEQUENCE DESCRIPTION: SEQ ID NO:8:	
Glu Val Gln Leu Gln Gln Ser Gly Pro Glu Leu Val Lys Pro Gly Th	r
Ser Val Arg Ile Ser Cys Lys Thr Ser Gly Tyr Thr Phe Thr Glu Ty 20 25 30	r
Thr Ile His Trp Val Lys Gln Ser His Gly Lys Ser Leu Glu Trp Ile 35 40 45	е

Gly Asn Ile Asn Pro Asn Asn Gly Gly Thr Thr Tyr Asn Gln Lys Phe 50 60

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Glu 65	Asp	Lys	Ala	Thr	Leu 70	Thr	Val	Asp	Lys	Ser 75	Ser	Ser	Thr	Ala	Туr 80
Met	Glu	Leu	Arg	Ser 85	Leu	Thr	Ser	Glu	Asp 90	Ser	Ala	Val	Tyr	Tyr 95	Cys
Ala	Ala	Gly	Trp 100			Asp		Trp 105	Gly	Gln	Gly	Thr	Thr 110	Leu	Thr
Val	Ser	Ser 115													

(2) INFORMATION FOR SEQ ID NO:9:

- (i) SEQUENCE CHARACTERISTICS:
 - (A) LENGTH: 363 base pairs (B) TYPE: nucleic acid (C) STRANDEDNESS: single

 - (D) TOPOLOGY: linear
- (ii) MOLECULE TYPE: cDNA
- (xi) SEQUENCE DESCRIPTION: SEQ ID NO:9:

TTATATGGAG	CTGATGGGAA	CATTGTAATG	ACCCAATCTC	CCAAATCCAT	GTCCATGTCA	60
GTAGGAGAGA	GGGTCACCTT	GACCTGCAAG	GCCAGTGAGA	ATGTGGTTAC	TTATGTTTCC	120
TGGTATCAAC	AGAAACCAGA	GCAGTCTCCT	AAACTGCTGA	TATACGGGGC	ATCCAACCGG	180
TACACTGGGG	TCCCCGATCG	CTTCACAGGC	AGTGGATCTG	CAACAGATTT	CACTCTGACC	240
ATCAGCAGTG	TGCAGGCTGA	AGACCTTGCA	GATTATCACT	GTGGACAGGG	TTACAGCTAT	300
CCGTACACGT	TCGGAGGGGG	GACCAAGCTG	GAAATAAAAC	GGGCTGATGC	TGCACCAACT	360
GTA						363

(2) INFORMATION FOR SEQ ID NO:10:

- (i) SEQUENCE CHARACTERISTICS:
 - (A) LENGTH: 363 base pairs
 - (B) TYPE: nucleic acid
 - (C) STRANDEDNESS: single
 - (D) TOPOLOGY: linear
- (ii) MOLECULE TYPE: cDNA
- (xi) SEQUENCE DESCRIPTION: SEQ ID NO:10:

TACAGTTGGT	GCAGCATCAG	CCCGTTTTAT	TTCCAGCTTG	GTCCCCCCTC	CGAACGTGTA	60
CGGATAGCTG	TAACCCTGTC	CACAGTGATA	ATCTGCAAGG	TCTTCAGCCT	GCACACTGCT	120
GATGGTCAGA	GTGAAATCTG	TTGCAGATCC	ACTGCCTGTG	AAGCGATCGG	GGACCCCAGT	180

TAA						363
TACTGACATG	GACATGGATT	TGGGAGATTG	GGTCATTACA	ATGTTCCCAT	CAGCTCCATA	360
CCAGGAAACA	TAAGTAACCA	CATTCTCACT	GGCCTTGCAG	GTCAAGGTGA	CCCTCTCTCC	300
GTACCGGTTG	GATGCCCCGT	ATATCAGCAG	TTTAGGAGAC	TGCTCTGGTT	TCTGTTGATA	240

(2) INFORMATION FOR SEQ ID NO:11:

- (i) SEQUENCE CHARACTERISTICS:
 - (A) LENGTH: 121 amino acids
 - (B) TYPE: amino acid
 - (C) STRANDEDNESS:
 - (D) TOPOLOGY: linear
- (ii) MOLECULE TYPE: protein
- (xi) SEQUENCE DESCRIPTION: SEQ ID NO:11:

Leu Tyr Gly Ala Asp Gly Asn Ile Val Met Thr Gln Ser Pro Lys Ser

1 10 15

Met Ser Met Ser Val Gly Glu Arg Val Thr Leu Thr Cys Lys Ala Ser 20 25 30

Glu Asn Val Val Thr Tyr Val Ser Trp Tyr Gln Gln Lys Pro Glu Gln 35 40 45

Ser Pro Lys Leu Leu Ile Tyr Gly Ala Ser Asn Arg Tyr Thr Gly Val 50 55

Pro Asp Arg Phe Thr Gly Ser Gly Ser Ala Thr Asp Phe Thr Leu Thr 65 70 75 80

Ile Ser Ser Val Gln Ala Glu Asp Leu Ala Asp Tyr His Cys Gly Gln
85 90 95

Gly Tyr Ser Tyr Pro Tyr Thr Phe Gly Gly Gly Thr Lys Leu Glu Ile 100 105 110

Lys Arg Ala Asp Ala Ala Pro Thr Val 115 120

(2) INFORMATION FOR SEQ ID NO:12:

- (i) SEQUENCE CHARACTERISTICS:
 - (A) LENGTH: 114 amino acids
 - (B) TYPE: amino acid
 - (C) STRANDEDNESS:
 - (D) TOPOLOGY: linear
- (ii) MOLECULE TYPE: protein
- (xi) SEQUENCE DESCRIPTION: SEQ ID NO:12:

Tyr Met Glu Leu Met Gly Thr Leu Pro Asn Leu Pro Asn Pro Cys Pro 1 5 10 15

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Cys Gln Glu Arg Gly Ser Pro Pro Ala Arg Pro Val Arg Met Trp Leu

Leu Met Phe Pro Gly Ile Asn Arg Asn Gln Ser Ser Leu Leu Asn Cys

Tyr Thr Gly His Pro Thr Gly Thr Leu Gly Ser Pro Ile Ala Ser Gln

Ala Val Asp Leu Gln Gln Ile Ser Leu Pro Ser Ala Val Cys Arg Leu

Lys Thr Leu Gln Ile Ile Thr Val Asp Arg Val Thr Ala Ile Arg Thr

Arg Ser Glu Gly Gly Pro Ser Trp Lys Asn Gly Leu Met Leu His Gln

Leu Tyr

(2) INFORMATION FOR SEQ ID NO:13:

- (i) SEQUENCE CHARACTERISTICS:
 - (A) LENGTH: 116 amino acids
 - (B) TYPE: amino acid
 - (C) STRANDEDNESS:
 - (D) TOPOLOGY: linear
- (ii) MOLECULE TYPE: protein
- (xi) SEQUENCE DESCRIPTION: SEQ ID NO:13:

Ile Ile Trp Ser Trp Glu His Cys Asn Asp Pro Ile Ser Gln Ile His

Val His Val Ser Arg Arg Glu Gly His Leu Asp Leu Gln Gly Gln Glu

Cys Gly Tyr Leu Cys Phe Leu Val Ser Thr Glu Thr Arg Ala Val Ser

Thr Ala Asp Ile Arg Gly Ile Gln Pro Val His Trp Gly Pro Arg Ser

Leu His Arg Gln Trp Ile Cys Asn Arg Phe His Ser Asp His Gln Gln

Cys Ala Gly Arg Pro Cys Arg Leu Ser Leu Trp Thr Gly Leu Gln Leu

Ser Val His Val Arg Arg Gly Asp Gln Ala Gly Asn Lys Thr Gly Cys 105

Cys Thr Asn Cys 115

(2) INFORMATION FOR SEQ ID NO:14:

- (i) SEQUENCE CHARACTERISTICS:
 - (A) LENGTH: 321 base pairs

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	(B) TYPE: nucleic acid(C) STRANDEDNESS: single(D) TOPOLOGY: linear	
(ii)	MOLECULE TYPE: cDNA	
(xi)	SEQUENCE DESCRIPTION: SEQ ID NO:14:	
AACATTGTAA	TGACCCAATC TCCCAAATCC ATGTCCATGT CAGTAGGAGA GAGGGTCACC	60
TTGACCTGCA	AGGCCAGTGA GAATGTGGTT ACTTATGTTT CCTGGTATCA ACAGAAACCA	120
GAGCAGTCTC	CTAAACTGCT GATATACGGG GCATCCAACC GGTACACTGG GGTCCCCGAT	180
CGCTTCACAG	GCAGTGGATC TGCAACAGAT TTCACTCTGA CCATCAGCAG TGTGCAGGCT	240
GAAGACCTTG	CAGATTATCA CTGTGGACAG GGTTACAGCT ATCCGTACAC GTTCGGAGGG	300
GGGACCAAGC	TGGAAATAAA A	321
	RMATION FOR SEQ ID NO:15: SEQUENCE CHARACTERISTICS: (A) LENGTH: 321 base pairs (B) TYPE: nucleic acid (C) STRANDEDNESS: single (D) TOPOLOGY: linear	
(ii)	MOLECULE TYPE: cDNA	
(xi)	SEQUENCE DESCRIPTION: SEQ ID NO:15:	
TTTTATTTCC	AGCTTGGTCC CCCCTCCGAA CGTGTACGGA TAGCTGTAAC CCTGTCCACA	60
GTGATAATCT	GCAAGGTCTT CAGCCTGCAC ACTGCTGATG GTCAGAGTGA AATCTGTTGC	120
AGATCCACTG	CCTGTGAAGC GATCGGGGAC CCCAGTGTAC CGGTTGGATG CCCCGTATAT	180
CAGCAGTTTA	GGAGACTGCT CTGGTTTCTG TTGATACCAG GAAACATAAG TAACCACATT	240
CTCACTGGCC	TTGCAGGTCA AGGTGACCCT CTCTCCTACT GACATGGACA TGGATTTGGG	300
AGATTGGGTC	ATTACAATGT T	321
(2) INFOR	RMATION FOR SEQ ID NO:16:	
(i)	SEQUENCE CHARACTERISTICS: (A) LENGTH: 107 amino acids (B) TYPE: amino acid (C) STRANDEDNESS: (D) TOPOLOGY: linear	
(ii)	MOLECULE TYPE: protein	

(xi) SEQUENCE DESCRIPTION: SEQ ID NO:16:

Asn 1	Ile	Val	Met	Thr 5	Gln	Ser	Pro	Lys	Ser 10	Met	Ser	Met	Ser	Val 15	Gly
Glu	Arg	Val	Thr 20	Leu	Thr	Сув	Lys	Ala 25	Ser	Glu	Asn	Val	Val 30	Thr	Туз
Val	Ser	Trp 35	Tyr	Gln	Gln	Lys	Pro 40	Glu	Gln	Ser	Pro	Lys 45	Leu	Leu	Ile
Tyr	Gly 50	Ala	Ser	Asn	Arg	Tyr 55	Thr	Gly	Val	Pro	Asp 60	Arg	Phe	Thr	Gl
Ser 65	Gly	Ser	Ala	Thr	Asp 70	Phe	Thr	Leu	Thr	Ile 75	Ser	Ser	Val	Gln	Ala 80
Glu	Asp	Leu	Ala	Asp 85	Tyr	His	Cys	Gly	Gln 90	Gly	Tyr	Ser	Tyr	Pro 95	Туг

(2) INFORMATION FOR SEQ ID NO:17:

100

- (i) SEQUENCE CHARACTERISTICS:
 - (A) LENGTH: 321 base pairs
 - (B) TYPE: nucleic acid
 - (C) STRANDEDNESS: single

Thr Phe Gly Gly Gly Thr Lys Leu Glu Ile Lys

- (D) TOPOLOGY: linear
- (ii) MOLECULE TYPE: cDNA

(xi) SEQUENCE DESCRIPTION: SEQ ID NO:17:

GACATTGTGA TGACCCAGTC TCACAAATTC ATGTCCACAT CAGTAGGAGA CAGGGTCAGC 60

ATCATCTGTA AGGCCAGTCA AGATGTGGGT ACTGCTGTAG ACTGGTATCA ACAGAAACCA 120

GGACAATCTC CTAAACTACT GATTTATTGG GCATCCACTC GGCACACTGG AGTCCCTGAT 180

CGCTTCACAG GCAGTGGATC TGGGACAGAC TTCACTCTCA CCATTACTAA TGTTCAGTCT 240

GAAGACTTGG CAGATTATTT CTGTCAGCAA TATAACAGCT ATCCTCTCAC GTTCGGTGCT 300

GGGACCATGC TGGACCTGAA A 321

(2) INFORMATION FOR SEQ ID NO:18:

- (i) SEQUENCE CHARACTERISTICS:
 - (A) LENGTH: 321 base pairs
 - (B) TYPE: nucleic acid
 - (C) STRANDEDNESS: single
 - (D) TOPOLOGY: linear
- (ii) MOLECULE TYPE: cDNA
- (xi) SEQUENCE DESCRIPTION: SEQ ID NO:18:

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TTTCAGGTCC	AGCATGGTCC	CAGCACCGAA	CGTGAGAGGA	TAGCTGTTAT	ATTGCTGACA	60
GAAATAATCT	GCCAAGTCTT	CAGACTGAAC	ATTAGTAATG	GTGAGAGTGA	AGTCTGTCCC	120
AGATCCACTG	CCTGTGAAGC	GATCAGGGAC	TCCAGTGTGC	CGAGTGGATG	CCCAATAAAT	180
CAGTAGTTTA	GGAGATTGTC	CTGGTTTCTG	TTGATACCAG	TCTACAGCAG	TACCCACATC	240
TTGACTGGCC	TTACAGATGA	TGCTGACCCT	GTCTCCTACT	GATGTGGACA	TGAATTTGTG	300
AGACTGGGTC	ATCACAATGT	С				321

(2) INFORMATION FOR SEQ ID NO:19:

- (i) SEQUENCE CHARACTERISTICS:
 - (A) LENGTH: 107 amino acids
 - (B) TYPE: amino acid
 - (C) STRANDEDNESS:
 - (D) TOPOLOGY: linear
- (ii) MOLECULE TYPE: protein
- (xi) SEQUENCE DESCRIPTION: SEQ ID NO:19:

Asp Ile Val Met Thr Gln Ser His Lys Phe Met Ser Thr Ser Val Gly

1 10 15

Asp Arg Val Ser Ile Ile Cys Lys Ala Ser Gln Asp Val Gly Thr Ala
20 25 30

Val Asp Trp Tyr Gln Gln Lys Pro Gly Gln Ser Pro Lys Leu Leu Ile 35 40 45

Tyr Trp Ala Ser Thr Arg His Thr Gly Val Pro Asp Arg Phe Thr Gly 50 55 60

Ser Gly Ser Gly Thr Asp Phe Thr Leu Thr Ile Thr Asn Val Gln Ser 65 70 75 80

Glu Asp Leu Ala Asp Tyr Phe Cys Gln Gln Tyr Asn Ser Tyr Pro Leu 85 90 95

Thr Phe Gly Ala Gly Thr Met Leu Asp Leu Lys

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WHAT IS CLAIMED:

1. A method of ablating or killing cancerous cells comprising:

providing a biological agent which, when contacted with an extracellular domain of prostate specific membrane antigen, binds to the extracellular domain of prostate specific membrane antigen and

contacting vascular endothelial cells proximate to the cancerous cells with the biological agent under conditions effective to permit both binding of the biological agent to the vascular endothelial cells proximate to the cancerous cells and ablating or killing of the cancerous cells.

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- 2. A method according to claim 1, wherein the biological agent kills or ablates the vascular endothelial cells proximate to the cancerous cells, thereby killing or ablating the cancerous cells by reducing blood flow thereto.
- 3. A method according to claim 1, wherein the cancerous cells are renal cancerous cells, urothelial cancerous cells, colon cancerous cells, rectal cancerous cells, lung cancerous cells, breast cancerous cells, or cancerous cells of metastatic adenocarcinoma to the liver.
- 4. A method according to claim 1, wherein the biological agent is an antibody or binding portion thereof, probe, or ligand.
- 5. A method according to claim 1, wherein the biological agent, when contacted with an extracellular domain of prostate specific membrane antigen, is internalized with the prostate specific membrane antigen.

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6. A method according to claim 1, wherein said contacting is carried out in a living mammal and comprises:

administering the biological agent to the
mammal under conditions effective to permit both binding
of the biological agent to vascular endothelial cells
proximate to the cancerous cells and killing of the
cancerous cells.

- 7. A method according to claim 6, wherein said administering is carried out orally, parenterally, subcutaneously, intravenously, intramuscularly, intraperitoneally, by intranasal instillation, by intracavitary or intravesical instillation, intraocularly, intraarterially, intralesionally, or by application to mucous membranes.
- 8. A method according to claim 4, wherein an antibody is used in carrying out said method, the antibody being selected from the group consisting of a monoclonal antibody and a polyclonal antibody.
- 9. A method according to claim 8, wherein the antibody is selected from the group consisting of an E99, a J415, a J533, and a J591 monoclonal antibody.
 - 10. A method according to claim 8, wherein the antibody is a monoclonal antibody produced by a hybridoma cell line having an ATCC Accession Number selected from the group consisting of HB-12101, HB-12109, HB-12127, and HB-12126.
- 11. A method according to claim 4, wherein a binding portion of an antibody is used in carrying out said method, the binding portion being selected from the group consisting of an Fab fragment, an F(ab')₂ fragment, and an Fv fragment.

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12. A method according to claim 4, wherein the probe or ligand is used in carrying out said method.

- 13. A method according to claim 1, wherein the biological agent is bound to a substance effective to kill or ablate the cancerous cells upon binding of the biological agent to vascular endothelial cells proximate to the cancerous cells.
- 14. A method according to claim 13, wherein the substance effective to kill or ablate the cancerous cells is a cytotoxic drug.
- 15. A method according to claim 14, wherein
 the cytotoxic drug is selected from the group consisting
 of therapeutic drug, a compound emitting radiation,
 molecules of plant, fungal, or bacterial origin,
 biological proteins, and mixtures thereof.
- 20 16. A method according to claim 4, wherein the antibody is effective to initiate an endogenous host immune function.
- 17. A method according to claim 16, wherein the endogenous host immune function is complement-mediated cellular cytoxicity.
- 18. A method according to claim 16, wherein the endogenous host immune function is antibody-dependent cellular cytoxicity.
 - 19. A method according to claim 1, wherein the biological agent is in a composition further comprising a physiologically acceptable carrier, excipient, or stabilizer.

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20. A method according to claim 1, wherein the biological agent is in a composition further comprising a pharmaceutically acceptable carrier, excipient, or stabilizer.

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21. A method of detecting cancerous tissue in a biological sample comprising:

providing an biological agent which, when contacted with an extracellular domain of prostate specific membrane antigen, binds to the extracellular domain of prostate specific membrane antigen, wherein the biological agent is bound to a label effective to permit detection of vascular endothelial cells proximate to or within the cancerous tissue upon binding of the biological agent to the vascular endothelial cells proximate to or within the cancerous tissue;

contacting the biological sample with the biological agent having a label under conditions effective to permit binding of the biological agent to the vascular endothelial cells proximate to or within the cancerous tissue in the biological sample; and

detecting a presence of any cancerous tissue in the biological sample by detecting the label.

- 22. A method according to claim 21, wherein the cancerous tissue is renal cancerous tissue, urothelial cancerous tissue, colon cancerous tissue, rectal cancerous tissue, lung cancerous tissue, breast cancerous tissue, or cancerous tissue of metastatic adenocarcinoma to the liver.
 - 23. A method according to claim 21, wherein the biological agent is an antibody or binding portion thereof, probe, or ligand.

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24. A method according to claim 21, wherein the biological agent, when contacted with an

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extracellular domain of prostate specific membrane antigen, is internalized with the prostate specific membrane antigen.

5 25. A method according to claim 21, wherein said contacting is carried out in a living mammal and comprises:

administering the biological agent to the mammal under conditions effective to permit binding of the biological agent to the vascular endothelial cells proximate to or within the cancerous tissue in the biological sample.

- 26. A method according to claim 25, wherein 15 the label is a short-range radiation emitter.
- 27. A method according to claim 25, wherein said administering is carried out orally, parenterally, subcutaneously, intravenously, intramuscularly, intraperitoneally, by intraversal instillation, by intracavitary or intravesical instillation, intraocularly, intraarterially, intralesionally, or by application to mucous membranes.
- 28. A method according to claim 23, wherein an antibody is used in carrying out said method, said antibody being selected from the group consisting of a monoclonal antibody and a polyclonal antibody.
- 29. A method according to claim 28, wherein the antibody is selected from the group consisting of an E99, a J415, a J533, and a J591 monoclonal antibody.
- 30. A method according to claim 28, wherein 35 the antibody is a monoclonal antibody produced by a hybridoma cell line having an ATCC Accession Number

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selected from the group consisting of HB-12101, HB-12109, $\rm HB-12127$, and $\rm HB-12126$.

- 31. A method according to claim 23, wherein a binding portion of an antibody is used in carrying out said method, the binding portion being selected from the group consisting of an Fab fragment, an F(ab')₂ fragment, and an Fv fragment.
- 10 32. A method according to claim 23, wherein a probe or ligand is used in carrying out said method.
- 33. A method according to claim 21, wherein the label is selected from the group consisting of a fluorescent label, a radioactive label, a nuclear magnetic resonance active label, a luminescent label, and a chromophore label.
- 34. A method according to claim 21, wherein the biological agent is in a composition further comprising a physiologically acceptable carrier, excipient, or stabilizer.
- 35. A method according to claim 21, wherein the biological agent is in a composition further comprising a pharmaceutically acceptable carrier, excipient, or stabilizer.
- 36. A method according to claim 21, wherein said contacting is carried out in a sample of serum or urine.
 - 37. A method according to claim 21, wherein said contacting is carried out in a tissue biopsy sample.

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38. A method of ablating or killing normal, benign hyperplastic, and cancerous prostate epithelial cells comprising:

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providing a biological agent which binds to an extracellular domain of prostate specific membrane antigen and

contacting said cells with the biological agent under conditions effective to permit both binding of the biological agent to the extracellular domain of the prostate specific membrane antigen and ablating or killing of said cells.

- 39. A method according to claim 38, wherein the biological agent is an antibody or binding portion thereof, probe, or ligand.
 - 40. A method according to claim 38, wherein the biological agent is internalized with the prostate specific membrane antigen.

41. A method according to claim 38, wherein said contacting is carried out in a living mammal and comprises:

administering the biological agent to the
25 mammal under conditions effective to permit both binding
of the biological agent to the extracellular domain of
the prostate specific membrane antigen and killing of
said cells.

- 42. A method according to claim 41, wherein the biological agent is internalized with the prostate specific membrane antigen.
- 43. A method according to claim 41, wherein said administering is carried out orally, parenterally, subcutaneously, intravenously, intramuscularly, intraperitoneally, by intranasal instillation, by

intracavitory or intravesical instillation, intraocularly, intraarterially, intralesionally, or by application to mucous membranes.

- 44. A method according to claim 39, wherein an antibody is used in carrying out said method, the antibody being selected from the group consisting of a monoclonal antibody and a polyclonal antibody.
- 45. A method according to claim 44, wherein the antibody is selected from the group consisting of an E99, a J415, a J533, and a J591 monoclonal antibody.
- 46. A method according to claim 44, wherein
 the antibody is a monoclonal antibody produced by a
 hybridoma cell line having an ATCC Accession Number
 selected from the group consisting of HB-12101, HB-12109,
 HB-12127, and HB-12126.
- 20 47. A method according to claim 39, wherein a binding portion of an antibody is used in carrying out said method, the binding portion being selected from the group consisting of an Fab fragment, an F(ab')₂ fragment, and an Fv fragment.

- 48. A method according to claim 39, wherein the probe or ligand is used in carrying out said method.
- 49. A method according to claim 38, wherein
 the biological agent is bound to a substance effective to
 kill or ablate said cells upon binding of the biological
 agent to the extracellular domain of the prostate
 specific membrane antigen of said cells.
- 50. A method according to claim 49, wherein the substance effective to kill said cells is a cytotoxic drug.

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- 51. A method according to claim 50, wherein the cytotoxic drug is selected from the group consisting of therapeutic drug, a compound emitting radiation, molecules of plant, fungal, or bacterial origin, biological proteins, and mixtures thereof.
- 52. A method according to claim 39, wherein the antibody is effective to initiate an endogenous host immune function.
 - 53. A method according to claim 52, wherein the endogenous host immune function is complement-mediated cellular cytoxicity.

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- 54. A method according to claim 52, wherein the endogenous host immune function is antibody-dependent cellular cytoxicity.
- 55. A method according to claim 38, wherein the biological agent is in a composition further comprising a physiologically acceptable carrier, excipient, or stabilizer.
- 56. A method according to claim 38, wherein the biological agent is in a composition further comprising a pharmaceutically acceptable carrier, excipient, or stabilizer.
- 30 57. A method according to claim 38 further comprising:
 - providing a second biological agent which binds to the extracellular domain of prostate specific membrane antigen and
- ontacting said cells with the second biological agent under conditions effective to permit binding of the second biological agent to the

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extracellular domain of the prostate specific membrane antigen.

- 58. A method according to claim 57, wherein the biological agent and the second biological agent bind to non-competing binding sites on the extracellular domain of the prostate specific membrane antigen.
- 59. A method according to claim 57, wherein the biological agent is a J415 monoclonal antibody and the second biological agent is an E99, a J533, or a J591 monoclonal antibody.
- 60. A method according to claim 57, wherein
 the biological agent is bound to a substance effective to
 kill or ablate said cells upon binding of the biological
 agent to the extracellular domain of the prostate
 specific membrane antigen of said cells and upon
 activation by an activator and wherein the second
 biological agent is bound to the activator.
 - 61. A method of detecting normal, benign hyperplastic, and cancerous prostate epithelial cells or a portion thereof in a biological sample comprising:
- providing an biological agent which binds to an extracellular domain of prostate specific membrane antigen, wherein the biological agent is bound to a label effective to permit detection of said cells or a portion thereof upon binding of the biological agent to said cells or a portion thereof;

contacting the biological sample with the biological agent having a label under conditions effective to permit binding of the biological agent to the extracellular domain of the prostate specific membrane antigen of any of said cells or a portion thereof in the biological sample; and

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detecting a presence of any of said cells or a portion thereof in the biological sample by detecting the label.

- 5 62. A method according to claim 61, wherein the biological agent is an antibody or binding portion thereof, probe, or ligand.
- 63. A method according to claim 61, wherein the biological agent is internalized with the prostate specific membrane antigen.
 - 64. A method according to claim 61, wherein said contacting is carried out in a living mammal and comprises:

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administering the biological agent to the mammal under conditions effective to permit binding of the biological agent to the extracellular domain of the prostate specific membrane antigen of any of said cells or a portion thereof in the biological sample.

- 65. A method according to claim 64, wherein the label is a short-range radiation emitter.
- 25 66. A method according to claim 64, wherein said detecting is carried out rectally.
 - 67. A method according to claim 64, wherein the biological sample is the mammal's prostatic fossa.
 - 68. A method according to claim 64, wherein said detecting is carried out after a prostatectomy.
- 69. A method according to claim 64, wherein 35 the biological agent is internalized with the prostate specific membrane antigen.

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- 70. A method according to claim 64, wherein said administering is carried out orally, parenterally, subcutaneously, intravenously, intramuscularly, intraperitoneally, by intraversal instillation, by intracavitory or intravesical instillation, intraocularly, intraarterially, intralesionally, or by application to mucous membranes.
- 71. A method according to claim 62, wherein an antibody is used in carrying out said method, said antibody being selected from the group consisting of a monoclonal antibody and a polyclonal antibody.
- 72. A method according to claim 71, wherein the antibody is selected from the group consisting of an E99, a J415, a J533, and a J591 monoclonal antibody.
- 73. A method according to claim 71, wherein the antibody is a monoclonal antibody produced by a 20 hybridoma cell line having an ATCC Accession Number selected from the group consisting of HB-12101, HB-12109, HB-12127, and HB-12126.
- 74. A method according to claim 62, wherein a binding portion of an antibody is used in carrying out said method, the binding portion being selected from the group consisting of an Fab fragment, an F(ab')₂ fragment, and an Fv fragment.
- 75. A method according to claim 62, wherein a probe or ligand is used in carrying out said method.
- 76. A method according to claim 61, wherein the label is selected from the group consisting of a

 35 fluorescent label, a radioactive label, a nuclear magnetic resonance active label, a luminescent label, and a chromophore label.

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77. A method according to claim 61, wherein the biological agent is in a composition further comprising a physiologically acceptable carrier, excipient, or stabilizer.

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78. A method according to claim 61, wherein the biological agent is in a composition further comprising a pharmaceutically acceptable carrier, excipient, or stabilizer.

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- 79. A method according to claim 61, wherein said contacting is carried out in a sample of serum or urine.
- 15 80. An isolated biological agent which binds to an extracellular domain of prostate specific membrane antigen.
- 81. An isolated biological agent according to claim 80, wherein said isolated biological agent is an isolated antibody or binding portion thereof, probe, or ligand.
- 82. An isolated biological agent according to claim 80, wherein the biological agent is internalized with the prostate specific membrane antigen.
 - 83. An isolated biological agent according to claim 81, wherein the isolated biological agent is an antibody selected from the group consisting of a monoclonal antibody and a polyclonal antibody.
 - 84. An isolated biological agent according to claim 83, wherein the antibody is selected from the group consisting of an E99, a J415, a J533, and a J591 monoclonal antibody.

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85. An isolated biological agent according to claim 83, wherein the antibody is a monoclonal antibody produced by a hybridoma having an ATCC Accession Number selected from the group consisting of HB-12101, HB-12109, HB-12127, and HB-12126.

- 86. An isolated biological agent according to claim 81, wherein the isolated biological agent is a binding portion of an antibody selected from the group consisting of a Fab fragment, a F(ab')₂ fragment, and a Fv fragment.
- 87. An isolated biological agent according to claim 81, wherein the isolated biological agent is a probe or ligand.
 - 88. An isolated biological agent according to claim 80, wherein the biological agent is bound to a cytotoxic drug.

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- 89. An isolated biological agent according to claim 88, wherein the cytotoxic drug is selected from the group consisting of a therapeutic drug, a compound emitting radiation, molecules of plant, fungal, or bacterial origin, biological proteins, and mixtures thereof.
 - 90. A composition comprising:
- a biological agent according to claim 88 and a physiologically acceptable carrier, excipient, or stabilizer mixed with the biological agent.
 - 91. A composition comprising:
- a biological agent according to claim 88 and a pharmaceutically acceptable carrier, excipient, or stabilizer mixed with the biological agent.

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- 92. An isolated biological agent according to claim 80, wherein said biological agent is bound to a label.
- 93. An isolated biological agent according to claim 92, wherein the label is selected from the group consisting of a fluorescent label, a biologically-active enzyme label, a radioactive label, a nuclear magnetic resonance active label, a luminescent label, and a chromophore label.
 - 94. A composition comprising:
 - a biological agent according to claim 92 and
 - a physiologically acceptable carrier,
- 15 excipient, or stabilizer mixed with the biological agent.
 - 95. A composition comprising:
- a biological agent according to claim 92 and
 20 a pharmaceutically acceptable carrier,
 excipient, or stabilizer mixed with the biological agent.
- 96. A kit for detecting cancer comprising:
 a biological agent according to claim 92 and
 25 means to detect the label.

- 97. A kit according to claim 96, wherein the label is selected from the group consisting of a fluorescent label, a biologically-active enzyme label, a radioactive label, a nuclear magnetic resonance active label, a luminescent label, and a chromophore label.
- 98. A kit according to claim 96, wherein said biological agent is an E99, a J415, a J533, or a J591 monoclonal antibody.

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99. A kit according to claim 96, wherein the biological agent is in a composition further comprising a physiologically acceptable carrier, excipient, or stabilizer.

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100. A kit according to claim 96, wherein the biological agent is in a composition further comprising a pharmaceutically acceptable carrier, excipient, or stabilizer.

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- 101. A kit according to claim 96, wherein the cancer is selected from the group consisting of prostate cancer, renal cancer, urothelial cancer, colon cancer, lung cancer, breast cancer, and metastatic adenocarcinoma to the liver
- 102. A hybridoma cell line that produces a monoclonal antibody which binds to an extracellular domain of prostate specific membrane antigen.

- 103. A hybridoma cell according to claim 102, wherein the antibody is internalized with the prostate specific membrane antigen.
- 104. A hybridoma cell line according to claim 102, wherein the monoclonal antibody is an E99, a J415, a J533, or a J591 monoclonal antibody.
- 105. A hybridoma cell line according to claim
 102 wherein the hybridoma cell line has an ATCC Accession
 Number selected from the group consisting of HB-12101,
 HB-12109, HB-12127, and HB-12126.

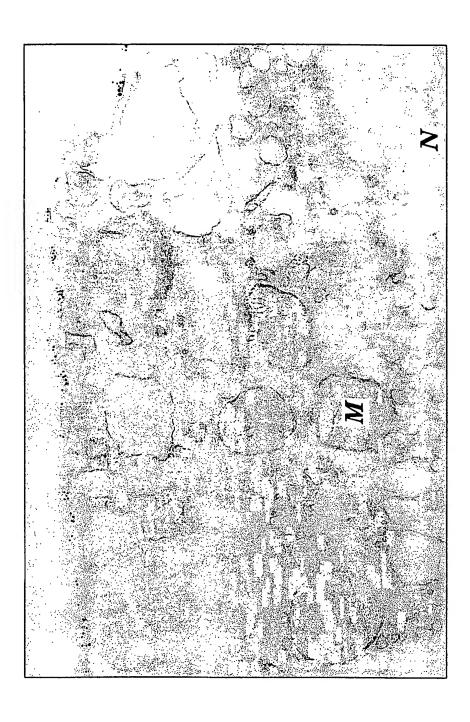


FIG. 1





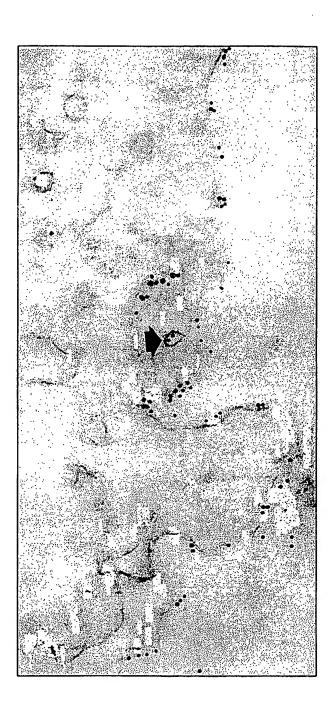


FIG. 3



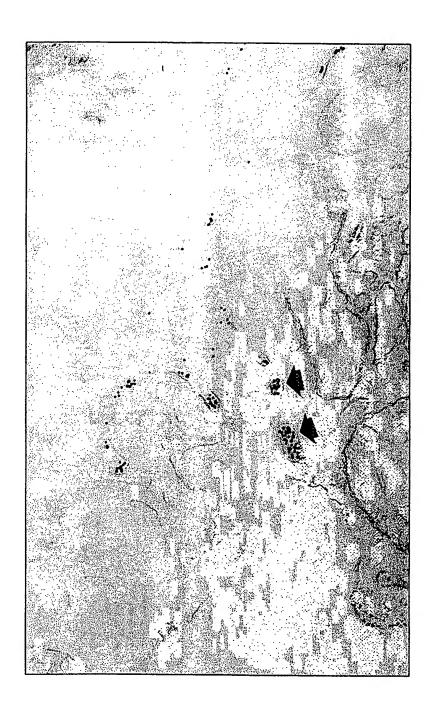




FIG. 5

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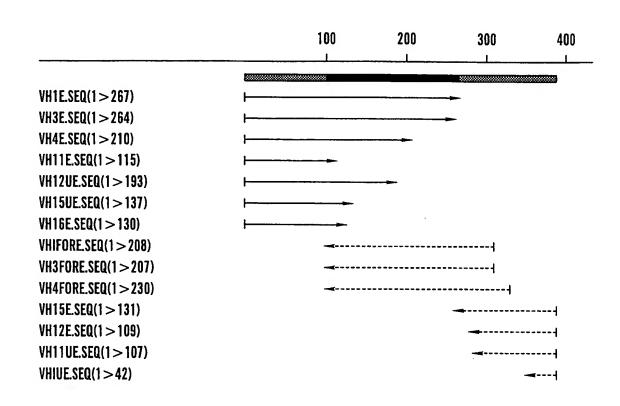
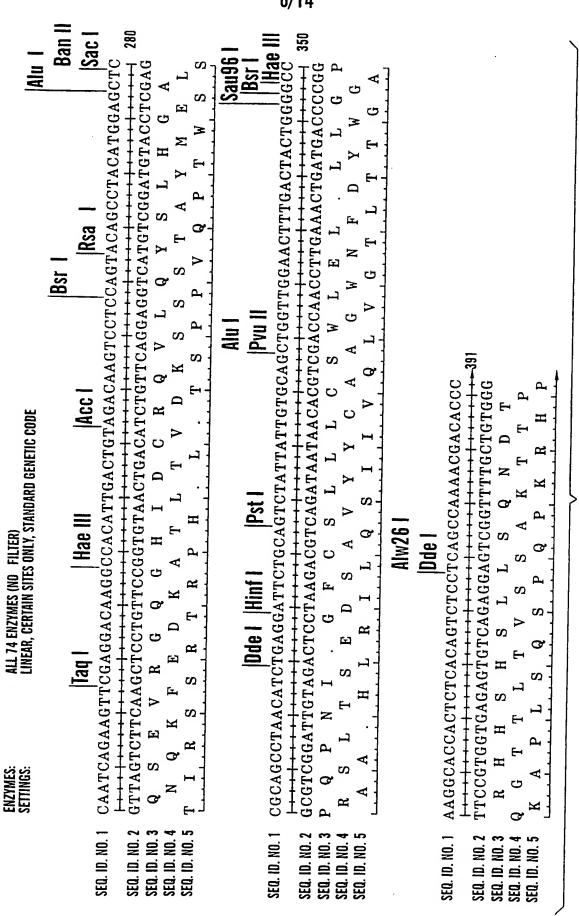


FIG. 6

FIG. 7A



LIPMAN-PEARSON PROTEIN ALIGNMENT KTUPLE: 2; GAP PENALTY: 4; GAP LENGTH PENALTY: 12

		9/14	
CONSENSUS Length	125	60 110 120	·
GAP LENGTH	10	EVQLQQSGPELVKPGTSVRISCKTSGYTFTEYTI-HWVKQSHGKSLEWIGNINPNNGGTT EVQLQQSGPELVKPGSVRISCKASGYTFTEYTI-HWVKQSHGKSLEWIGLINP.NGGT: EVQLQQSGPELVKPGASVKISCKASGYTFTDYYMNNWVKQSPGKSLEWIGDINPGNGGTS	
GAP Number	2	VKQSHGKSLE VKQS GKSLE VKQSPGKSLE L40 AAGA A G ARGYYSSSYM	
SIMILARITY	75.6	GYTFTEYTI-HWYGYTFTSYTI-HWYGYTFTSYMNNWYGYTFTDYYMNNWYGYTFTDYYMNNWYGYTCHEDSAVYYCHSEDSAVYYCHSEDSAVYYCHSEDSAVYYCH	
SEQ2(1>125) Muvhiia.pro	(1>125)	EVQLQQSGPELVKPGTSVRİSCKTSGYTFTEYTI - HWVKQS EVQLQQSGPELVKPG: SV: ISCK: SGYTFT: Y: : WVKQS EVQLQQSGPELVKPGASVKISCKASGYTFTDYYMNNWVKQS L10	
SEQL(L>115) J591VH.PRO	(1>115)	EVQLQQSGPELV EVQLQQSGPELV EVQLQQSGPELV EVQLQQSGPELV _10 _10 _10 \YNQKFEDKATLT YNQKF::KATLT YNQKFKGKATLT	LTVSS : TVSS VTVSS

FIG. 8

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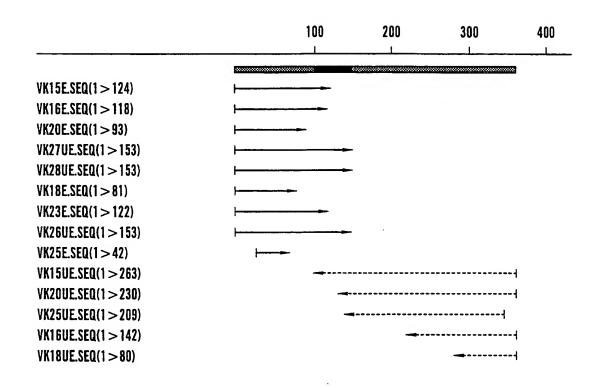


FIG. 9

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	70	140	210
ENZYMES: ALL 74 ENZYMES (NO FILIER) SETTINGS: LINEAR, CERTAIN SITES ONLY, STANDARD GENETIC CODE Alu	SEQ. ID. NO. 9 TTATATGGAGCTGATGGGAACATTGTAATGACCCAATCTCCCAAATCCATGTCCATGTCAGTAGGAGAGAGA	SEQ. ID. NO. 9 GGGTCACCTTGACCTGCAAGGCCAGTGAGAATGTGGTTACTTATGTTTCCTGGTATCAACAGAAACCAGA SEQ. ID. NO. 10 CCCAGTGGAACTGGGTCACTTTACACCAATGAATACAAAGGACCATAGTTTTTTTT	Hpa Bsr Bsa Bsa Bsa

FIG. 10A

350 Eco57 **AGTGGATCTGCAACAGATTTCACTCTGACCATCAGCAGTGTGCAGGCTGAAGACCTTGCAGATTATCACT** GTGGACAGGGTTACAGCTATCCGTACACGTTCGGAGGGGGACCAAGCTGGAAATAAAACGGGCTGATGC CACCTGTCCCAATGTCGATAGGCATGTGCAAGCCTCCCCCCTGGTTCGACCTTTATTTGCCCGACTACG **TCACCTAGACGTTGTCTAAAGTGAGACTGGTAGTCGTCACACGTCCGACTTCTGGAACGTCTAATAGTGA** Mbo II Bsp6 11 Sau96 I c Ava K Ö ALL 74 ENZYMES (NO FILTER) LINEAR, CERTAIN SITES ONLY, STANDARD GENETIC CODE S ß H Rsal S S Alul G ENZYMES: Settings: SEQ. ID. NO. 12 Seq. Id. No. 13 SEQ. 1D. NO. 12 Seq. 1D. No. 13 SEQ. ID. NO. 10 SEQ. ID. NO. 10 SEQ. ID. NO. 11 SEQ. ID. NO. 11 SEQ. ID. NO. 9 SEQ. 1D. NO. 9

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FIG. 10B

TGCACCAACTGTA

SEQ. 10. NO. 9

ACGTGGTTGACAT

SEQ. 1D. NO. 10

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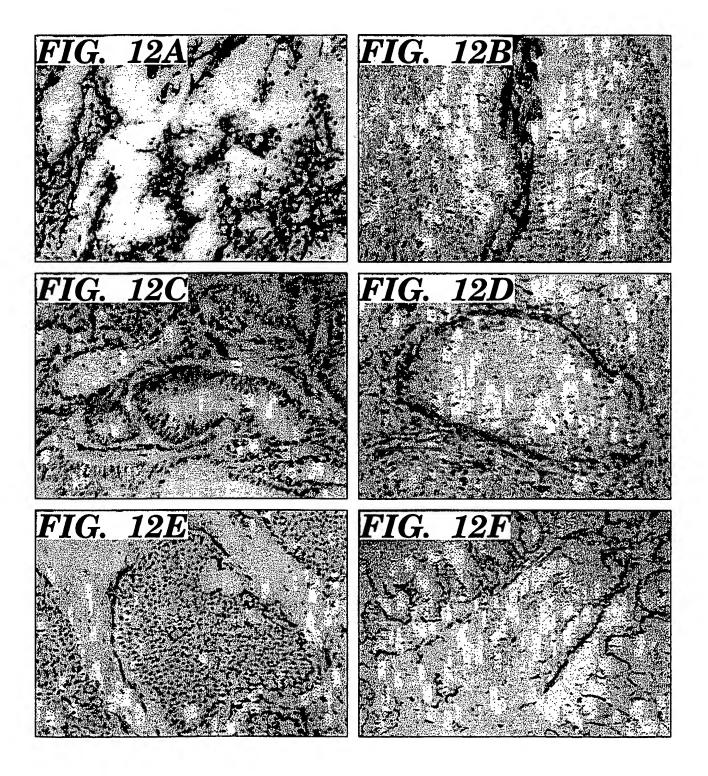
SEQ. 10. NO. 11 SEQ. 10. NO. 12 SEQ. 10. NO. 13

LIPMAN-PEARSON PROTEIN ALIGNMENT KTUPLE: 2; GAP PENALTY: 4; GAP LENGTH PENALTY: 12

		13/14
CONSENSUS	109	
GAP Length	2	LIYGASNRYTGVP LIYAS. :GVP LIYYASRLHSGVP L50 L50
GAP NUMBER	2	QKPEQSPKI QKP. SPKI QKPGGSPKI L40 7TFGGGTKLE TFGGGTKLE
SIMILARITY INDEX	60.4	ENVVTYVSWYCE :: X: WYCE WYCE
SEQ2(L > 1 1 1) MUVKV.PRO	(1 > 109)	NIVMTQSPKSMSMSVGERVTLTCKAS-ENVVTYVSWYQQKPEQSPKLLIYGASNRYTGVP: 1 MTQSP.S:SS:G:RVT:TC:AS::Y::WYQQKPEQSPKLLIYGASNRYTGVP: 1 MTQSP.S:SS:G:RVT:TC:AS::Y::WYQQKP:SPKLLIYAS.:GVPDIGMTQSPSSLSASLGDRVTITCRASQDDISNYLNWYQQKPGGSPKLLIYASRLHSGVP
SEQ1 (1>107) J591VK.PR0	(1>107)	NIVMTQSPKSMSP: 1 MTQSP.S:SDIGMTQSPSSLS/L10 L10 F60 DRFTGSGSATDFT SRFSGSGSGTDYS

FIG. 1

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Form PCT/ISA/210 (second short/Inly 1992)+

International application No. PCT/US97/12035

A. CLASSIFICATION OF SUBJECT MATTER IPC(6): Goin 33/574, 33/53, 33/569, 33/48 US CL: 435/7.2, 7.23; 436/63, 64 According to International Patent Classification (IPC) or to both national classification and IPC					
B. FIEL	DS SEARCHED				
Minimum de	ocumentation searched (classification system follower	d by classification symbols)			
U.S. :					
Documentat	ion searched other than minimum documentation to the	e extent that such documents are included	in the fields searched		
Electronic d	ata base consulted during the international search (ne	ame of data base and, where practicable,	search terms used)		
C. DOC	UMENTS CONSIDERED TO BE RELEVANT				
Category*	Citation of document, with indication, where ap	propriate, of the relevant passages	Relevant to claim No.		
Y	WRIGHT, G. L. Expression of Antigen in Normal, Benign, and Urologic Oncology. 1995. Vol. 1. Nopage 18.	Malignant Prostate Tissues,	1-105		
Y	MURPHY, G.P. Measurement of Antigen in the Serum with a New A 1996. Vol. 28. No. 4. pages 266-271	ntibody. The Prostate. April	1-105		
Y	ISRAELI, R.S. Molecular Cloning Encoding a Prostate-specific Membrane 53. No. 2. pages 227-230, especially	e Antigen, January 1993. Vol.	1-105		
X Furth	er documents are listed in the continuation of Box C	See patent family annex.			
'A' do	ecial categories of cited documents: custem defining the general state of the art which is not considered be of particular relevance	"T" later document published after the inte date and not in conflict with the appl the principle or theory underlying the	ication but cited to understand		
	tier document published on or after the international filing date	"X" document of perticular relevance; the			
	cument which may throw doubts on priority claim(s) or which is ad to establish the publication date of another citation or other	when the document is taken alone			
O do	cument referring to an oral disclosure, use, exhibition or other	"Y" document of particular relevance; the considered to involve an inventive combined with one or more other such being obvious to a person skilled in t	step when the document is a documents, such combination		
"P" doc	oussent published prior to the international filing date but later than priority date claimed	"&" document member of the same patent			
Date of the	actual completion of the international search	Date of mailing of the international sea	rch report		
Name and mailing address of the ISA/US Commissioner of Patents and Trademarks Box PCT Washington, D.C. 20231		Authorized officer WONNE EYLER	Freist /8		
Faccimile M		Telephone No. (703) 308-0106	(

International application No. PCT/US97/12035

Citation of document, with indication, where appropriate, of the relevant passages	Relevant to claim No
ISRAELL R.S. "Expression of the Prostate-specific Membrane Antigen" Cancer Research. April 1994. Vol. 54. No. 7. pages 1807-1811, especially page 1807.	1-105
US 5,489,525 A (PASTAN) 06 FEBUARY 1996, col. 2, lines 21-51.	1-105
<u>-</u>	
	Antigen" Cancer Research. April 1994. Vol. 54. No. 7. pages 1807-1811, especially page 1807. US 5,489,525 A (PASTAN) 06 FEBUARY 1996, col. 2, lines 21-

International application No. PCT/US97/12035

Box I Observations where certain claims were found unsearchable (Continuation of item 1 of first sheet)
This international report has not been established in respect of certain claims under Article 17(2)(a) for the following reasons:
1. Claims Nos.: because they relate to subject matter not required to be searched by this Authority, namely:
2. Claims Nos.: because they relate to parts of the international application that do not comply with the prescribed requirements to such an extent that no meaningful international search can be carried out, specifically:
3. Claims Nos.: because they are dependent claims and are not drafted in accordance with the second and third sentences of Rule 6.4(a).
Box II Observations where unity of invention is lacking (Continuation of item 2 of first sheet)
This International Searching Authority found multiple inventions in this international application, as follows:
Picaso See Extra Sheet.
· ·
·
1. X As all required additional search fees were timely paid by the applicant, this international search report covers all searchable claims.
2. As all searchable claims could be searched without effort justifying an additional fee, this Authority did not invite payment of any additional fee.
3. As only some of the required additional search fees were timely paid by the applicant, this international search report covers only those claims for which fees were paid, specifically claims Nos.:
4. No required additional search fees were timely paid by the applicant. Consequently, this international search report is restricted to the invention first mentioned in the claims; it is covered by claims Nos.:
Remark on Protest The additional search fees were accompanied by the applicant's protest.
No protest accompanied the payment of additional search fees.

International application No. PCT/US97/12035

BOX II. OBSERVATIONS WHERE UNITY OF INVENTION WAS LACKING This ISA found multiple inventions as follows:

This application contains the following inventions or groups of inventions which are not so linked as to form a single inventive concept under PCT Rule 13.1. In order for all inventions to be searched, the appropriate additional search fees must be paid.

Group I, claim(s)1-20, 38-60 and 80-105, drawn to antibodies to prostate membrane antigen and a method of using them to treat cancer.

Group II, claim(s) 21-37 and 61-79, drawn to a second method of using antibodies to detect prostate membrane antigen.

The inventions listed as Groups I and II do not relate to a single inventive concept under PCT Rule 13.1 because, under PCT Rule 13.2, they lack the same or corresponding special technical features for the following reasons: The methods of use of Groups I and II are entirely different methods with different outcomes. A method of detection does not actively treat a cancer.

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